

AN APPROACH TO THEOLOGICAL INTEGRATION IN PASTORAL CARE
AND COUNSELING BASED UPON THE PRACTICAL THEOLOGY
OF DANIEL DAY WILLIAMS

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ABSTRACT

An Approach to Theological Integration in Pastoral Care
and Counseling Based upon the Practical Theology
of Daniel Day Williams
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Daniel Day Williams in The Minister and the Care of Souls provides a theoretical foundation for a method of theological integration in pastoral care and counseling case study analysis. In particular Williams' "principle of linkage" provides the theoretical basis for a method of analogy.

The principle problem in this study is to create a practical method for structuring theological discussion of the images and dynamics of a case study. Frequently pastoral care specialists are more adept in the use of psychological language than theological language in case study analysis. How might we structure an effective theological analysis of case studies using Williams' concepts?

Williams discusses two modes of relationship: cause and effect relationships and symbolic relationships. The

latter are the concern of this proposed method of practical theology.

The method discussed and demonstrated is a process of brainstorming analogies between case study data and theological structures, including traditional Biblical images; this opens the way to deeper or more elaborate discussion of the meaning of such relationships for theological theory and pastoral practice. This is an empirical approach to practical theology inasmuch as the data of experience are used to provide direction or vision for theological creativity and insight.

The proposed method is used with three case studies: (1) a hospital chaplain's verbatim from an event in ministry in a special care nursery in the context of Clinical Pastoral Education; (2) a family of origin study grounded in family systems theory and Williams' theme of the "self-knowledge" of the minister; and (3) a history-taking interview which includes extemporaneous brainstorming using the method of analogy with a survivor of breast cancer and concomitant chronic depression.

The conclusion is that the method of analogy provides a practical means of theological reflection in case study analysis which may aid pastors and counselors both in theoretical discernment and ministerial practice.

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While this dissertation represents an individual's effort, it would not have been completed without the support of a widespread community and the technical assistance of several professionals. I am deeply grateful to the friends, mentors, family members, church members, and production assistants who contributed to this project.

My parents patiently and lovingly encouraged me toward the fulfillment of my plan, and provided me with a quiet work space during my sabbatical leaves from the local church.

The congregations of Travis Park United Methodist Church in San Antonio, Texas, and Northwest Hills United Methodist Church in Austin, Texas, each provided one-month sabbatical leaves for my research and writing.

Ed Heathcock, a supervisor in Clinical Pastoral Education and a clinical consultant to the Southwest Texas Conference Supervised Year of Probation, encouraged me toward advanced study in clinical education and modeled an approach to theological analysis in supervision which stimulated my interest in the subject of this dissertation.

Dr. Joe Gross was another Clinical Pastoral Education supervisor whose interest in Daniel Day Williams' contributions to pastoral care and counseling encouraged my own. Dr. Gross also supervised my work with families at the Special Care Nursery of the Baylor University Medical Center in Dallas, Texas. My interest in Williams was also motivated by friendship with his niece, Shelley Williams Austin, whom I first met when we were students at Yale Divinity School in 1975. Her memories of her uncle made Dr. Williams more familiar and personally attractive to me. Interest in Williams was one of the factors in my choice of the School of Theology at Claremont for Ph.D. studies, since Williams' papers are located there at the Center for Process Studies. Ed Everitt and John Hamby of the Ecumenical Center for Religion and Health in San Antonio, Texas, supervised my studies of family systems theory and the development of my family of origin project.

Dr. Allen Moore, now Dean of the School of Theology at Claremont, strongly encouraged my study of Williams for the purpose of a dissertation. I considered Dr. Moore the obvious choice to chair my advisory committee. His insight, guidance, and constant interest in my work has been crucial to the success of this work. Dr. Mary Elizabeth Moore and Dr. William Clements were excellent additions to my committee, and each gave highly valuable responses to my dissertation drafts. Dr. Howard Clinebell was a valued committee member and advisor prior to his retirement.

Vernen Liles was the typist for the first draft of this work, and Silent Partners, Inc. did the subsequent revisions and final draft. David C. Cook publishers in Elgin, Illinois, gave permission for use of "A Psalm at Children's Hospital" by Joseph Bayly.

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In no trivial way do I also thank God for the gift of life and the graceful fruition of this work.

Raymond D. Kiser
Austin, Texas

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DEDICATION

The dissertation is gratefully dedicated in memory of my
father Raymond E. Kiser (1915-1986) and in honor of my
mother Helen Murin Kiser.

The dedication is also offered in memory of Daniel Day
Williams and in honor of all surviving members
of his family.

CHAPTER 1

Foundations in Williams' Work for a Practical Theology of Pastoral Care and Counseling

The concern of this dissertation is to develop a model, based on the work of Daniel Day Williams, for doing theological construction through pastoral experience. The model depends upon some of the assumptions of empirical theology. In particular the operating assumption or theory of this dissertation is that theology can be empirical; that is, that theology can grow or develop from the data of human experience--especially in the context of the practice of pastoral care and counseling. In other words the method will not begin with theological doctrines and then move toward their appropriate application to human situations, but rather it will begin with the human situation and allow it to provide the data for theological reflection and construction. The intended outcome of this work is to provide a model or a method grounded in the theory of Daniel Day Williams--a model for doing theological reflection and integration in the clinical case study analysis of pastoral counselors and of other theological educators and practitioners who use case study methods in education and supervision.

The concept of an empirical approach to theology appears to be most widely embraced by process theologians,¹ among whom Daniel Day Williams was one of the most involved in interdisciplinary dialogue between theologians and pastoral clinicians. Williams was known as a theologian who could talk with and speak to the interests of pastoral care specialists in Christian ministry. His book, The Minister and the Care of Souls, is the most significant evidence of his attempts to speak to the theological dimensions of the practical disciplines of pastoral care and counseling.²

Don Browning has identified Williams along with Seward Hiltner (commonly regarded as one of the chief founding contributors to the modern pastoral care and counseling movement) as the primary representatives of a perspectival or analogical method in practical theology.³ While both

¹Process theologians include a large number of American scholars whose work is largely derivative of the metaphysics of Alfred North Whitehead. In particular, Henry Nelson Weiman and Charles Hartshorne are considered to be seminal exponents of this school of theology. Their influence at the University of Chicago prepared the way for a larger second generation of process theologians such as Daniel Day Williams, John B. Cobb, Jr., Bernard M. Loomer, Schubert M. Ogden and Bernard E. Meland. For a brief introduction of these persons, see John B. Cobb, Jr. and David Ray Griffin, Process Theology (Philadelphia: Westminster Press, 1976), 176-185.

²Daniel Day Williams, The Minister and the Care of Souls (New York: Harper & Row, 1961).

³Don S. Browning, "Analogy, Symbol, and Pastoral Theology in Tillich's Thought," Pastoral Psychology 19, no. 181 (February 1970): 41-54. See also a more recent work by Browning, "Pastoral Theology in a Pluralistic Age," Practical Theology, ed. Don S. Browning (San Francisco: Harper & Row, 1983), 187-202. Here Browning proposes a revised correlational method of doing pastoral theology

Browning and Hiltner credit Williams with the development of an analogical method for practical theology, no one has published any follow-up attempt to carry out Williams' ideas and outlines for practical theology. Indeed while Hiltner bemoaned the need for someone to take up the gauntlet which Williams had so carefully laid down, Hiltner himself continued to pursue other concerns. In other words, Hiltner did not see his own work as a development of Williams' model. My hope is to follow Williams' agenda in his attempt to do theological integration with a body of case study material; this will be presented in the course of this dissertation.

What will be presented here will be my own representation and interpretation of Williams' analogical method in doing theological reflection on case study material. Part of the case study section of this dissertation will focus upon me in the context of Williams' discussion of "The Self-knowledge of the Minister." Both my personal history and my pastoral practice will be the

which is influenced by such a method proposed by David Tracy. Browning finds Tracy's method to be closer to the "Hiltner-Williams model" than to Tillich's method of correlation.

Of the Hiltner-Williams approach Browning states: "The Hiltner-Williams model was basically a philosophical approach to pastoral theology. It certainly started with faith, but it brought the intuitions of faith into the public arena, fostered public discussion, reflected critically on the facts of faith, and attempted to advance publicly defensible reasons for the relevance of faith within the context of the public hospital, the public healing disciplines, and other public communities that are the context for our common lives." Browning, "Pastoral Theology," 192.

subjects of analysis. In particular this work will offer not one, but rather a variety of clinical case study situations which have been a part of my theological education and professional development and through which my self-knowledge and personal growth have been enhanced.

These case situations will then be reflected upon theologically in the context of Williams' approach. While the reasons for choosing this case study material will be set forth in greater detail below, the choice of case study subject matter will be more obviously justified in the actual presentations.

The hope is that the course of this dissertation will offer a thorough demonstration of a practical and useful model for theological reflection with case study material based upon an analogical method which may be credited directly to Daniel Day Williams. The creative interpretation of that method will, of course, be strictly my own.

In order to explain why Williams and his method were chosen for the subject of this dissertation, this work will begin with a discussion of Williams' place as a practical theologian and with the meaning of the term practical theology.

Daniel Day Williams was a process theologian, a second generation disciple of the Chicago School,⁴ who advocated

⁴For a brief and enlightening description of the Chicago School and the evolution of process theology in

the use of empirical methodology in theology. One of the basic emphases of this empiricism was to seek theological understanding through experience. A review of the entire body of his works would reveal that Williams was drawn to the experience of pastors, pastoral counselors, sociologists, anthropologists, and psychotherapists to find data for the enlightenment of his theology.

While Williams has been appropriately labeled as a process theologian, and thus also as a philosophical theologian, my contention here is that he was also an important practical theologian. In particular, The Minister and the Care of Souls, a book based on his Sprunt Lectures at the Union Theological Seminary in Richmond, Virginia in 1959, and published in 1961, is from my point of view a seminal work in practical theology for our present generation. While the whole of Williams' published works may be seen to be interrelated and thus relevant to the discussion at hand, the primary attention here will be given to this particular book in which the problems of integrating theology and pastoral practice were most directly addressed.

Beyond Williams' published works, I have had the privilege of examining several files of Williams' personal papers which are kept at the Center for Process Studies in

America, see John B. Cobb's chapter, "The Origins of Process Theology," in Meaning, Truth and God, ed. Leroy S. Rouner (Notre Dame: University of Notre Dame Press, 1982), 91-111.

Claremont, California. Some of his unpublished papers and lecture notes will also be noted in this discussion.

The problem of this dissertation will be to develop from Williams' writings--particularly on the care of souls--a model which pastors and pastoral counselors may follow for doing practical theology. The thrust of this discussion will remain fairly tightly focused on those concepts in Williams' work which point toward the development of an analogical method, as mentioned above. While an extremely rich discussion of subject matter could be beneficially explored in the entirety of Williams' works by the pastoral specialist, such a broadranged exposition must necessarily be the topic of another work beyond this one. In other words, no attempt is made here to summarize everything which Williams had to say which might be conceived as relevant to the work of pastoral care specialists.

Williams and the Re-emergence of Practical Theology

Practical theology is a term which has returned to popular usage among American theological scholars in recent years. In general the term has come to apply to any attempt at relating theory and practice in the theological enterprise. The term apparently has its roots in the division of disciplines of Protestant theological seminaries in the 18th and 19th centuries. In particular

Schleiermacher's Brief Outline of Theological Study⁵ appears to be a source for the standard division of seminary studies into fields of Bible, church history, systematic theology, and practical theology.⁶ Practical theology was presumed to be concerned with the arts and practices of ministry such as preaching, pastoral care, liturgy and worship, administration and church polity.

Since Schleiermacher's time, the term has been used broadly and with some understandable confusion of definition. In reference to the Schleiermacher model, Don Browning states:

At its best, practical theology in this model simply applied the results of exegetical, church historical and systematic theology to the concrete operations of church life or more narrowly to the activities of the clergy. At its worst, especially in more recent times, practical theology has been used as a catch phrase to refer to the practical training of candidates for the clergy--a training largely divorced from theological foundations and dominated by assumptions, knowledge and technologies taken over from the social sciences.⁷

Don Browning, David Tracy, Dennis McCann, James Fowler, John Westerhoff, and Edward Farley are among the scholars who are responsible for the current revival of practical

⁵Friedrich Schleiermacher, Kurze Darstellung des theologischen Studiums [Brief outline of theological study] (1811, revised 1830); reprinted as Brief Outline on the Study of Theology, trans. Terrence N. Tice (Richmond: John Knox, 1966).

⁶Don S. Browning, "The Revival of Practical Theology," Christian Century 101, no. 4 (February 1-8, 1984): 135.

⁷Ibid.

theology.⁸ This emergence represents some exciting ground breaking work for an American theological school system which seems to be drifting and searching for new leadership. On the other hand, I expect that the work of Browning and the others may serve to add confusion to the meaning of practical theology, unless their various efforts should move toward a new consensus.

Browning in particular is responsible for giving the new practical theology a strong emphasis on practical or "real world" ethics. He has demonstrated his multi-layered model, for example, as a means by which the church might develop an appropriate stance toward homosexuals in regard to the morality of homosexuality. Browning sees the work of practical theology as being applied to situational ethical problems as a means of helping the church to delineate problems and to prescribe answers.

John Westerhoff alludes to a definition of practical theology in an article on the subject: "Before I had any content for the title (Christian Educator), I thought of myself as a practical theologian whose function it was to integrate theology and the various dimensions of ministry as they relate to church and society."⁹ In the above statement

⁸For a discussion of this revival see Browning, "The Revival," 135. Also see Lewis S. Mudge and James N. Poling, eds., Formation and Reflection: The Promise of Practical Theology (Philadelphia: Fortress Press, 1987).

⁹John Westerhoff, "Practical Theology: What Will It Become?" Christian Century 101, no. 4 (February 1-8, 1984), 116.

the focus is on the concept of practical theology in terms of its function to integrate theology and the dimensions of ministry. Within the same article Westerhoff offers a more distinctive definition:

Practical theology emerging out of life in a faith community is a doxological mode of reflection that, by placing itself within the context of the church's service to God, attempts to facilitate the goal of a faithful life in the present on behalf of God's future.¹⁰

He adds that there are six interrelated dimensions of practical theology: the liturgical, the moral, the spiritual, the pastoral, the ecclesial, and the catechetical.¹¹

Of the six dimensions listed by Westerhoff, this work is mostly concerned with the pastoral (pastoral theology is the practical theology of care), although the methodology and subject matter should have relevance for other dimensions of practical theology. Throughout this work the definition of practical theology will be akin to Westerhoff's, particularly in terms of its function "to integrate theology and the various dimensions of ministry as they relate to church and society."¹² This work is concerned with issues, process, and content in the integration of theology and pastoral experience.

¹⁰Ibid., 131.

¹¹Ibid.

¹²Ibid., 116.

As such, this particular effort at the development of a model for doing practical theology might also operate under the rubric of pastoral theology. Prior to his present development of the discussion of practical theology, Don Browning defined a pastoral theologian as "one who does his theological reflection from a particular stance--the act of ministering to man's most deeply human problems in direct face-to-face confrontations."¹³ Browning's definition is one which is adequate to the task at hand. The review of Williams' work in this study highlights a model or a methodology for approaching the task of theological reflection from the stance of one who ministers to a person's most deeply human problems in direct face-to-face confrontation.

As I approach this task, I am indebted to no less an authority in the field of pastoral care and pastoral theology than Seward Hiltner, who was a seminary classmate of Williams, and who continued to interact with Williams professionally and personally throughout their respective careers. As late as the autumn of 1971--two years prior to Williams' untimely death--Hiltner and Williams had collaborated as coteachers of a course offered conjointly by the Princeton and Union Theological Seminaries, entitled, "Christian Doctrine and Pastoral Theology."¹⁴

¹³Browning, "Analogy, Symbol, and Pastoral Theology," 41.

¹⁴Insightful evidence of Williams' continuing work in practical theology is provided by a copy of a syllabus of

In a special triple issue of the Union Seminary Quarterly Review in 1975,¹⁵ a festschrift in honor of Daniel Day Williams, Seward Hiltner contributed an article entitled, "The Minister and the Care of Souls, Revisited."¹⁶ Within this article Hiltner gives his own high estimation of Williams' gifts in practical theological reflection and the importance of this particular volume; i.e., The Minister and the Care of Souls. Recalling his experience with Williams in the 1971 seminar mentioned above, Hiltner writes, "In this seminar I was struck more than ever, but not for the first time, with the depth of Williams' insights into pastoral care, pastoral theology, and dynamic psychology as well, over and above his theological acuity."¹⁷ Hiltner lamented the failure of this volume (The Minister and the Care of Souls) to impact its audience with the full power of

the course which I discovered in Williams' files at the Center for Process Studies in Claremont, California, which included the following catalogue description of the course: "Theological, pastoral theological, and psychological interpretations of selected primary documents of human experience, and study of the implications of these data for the pastoral task of the church. Requirements: reading of primary documents and of selected books in theology, pastoral theology, and psychology; writing of one report paper...."

¹⁵Union Seminary Quarterly Review 30, nos. 2-4 (Winter-Summer 1975), a triple issue offered as a festschrift in honor of Daniel Day Williams.

¹⁶Seward Hiltner, "The Minister and the Care of Souls, Revisited," Union Seminary Quarterly Review 30, nos. 2-4 (Winter-Summer 1975): 210-16.

¹⁷*Ibid.*, 210.

its insights as well as the failure of anyone to take up the pastoral theological agenda which it proposed.

Reflecting on the impact of Williams' work on pastoral specialists, Hiltner notes that

the "pastoral specialists," without exception had a profound respect for Dan Williams. He was invited to speak and discuss at many of their meetings. My estimate would be that he ranked second only to Paul Tillich as a theological prestige figure for the specialist groups during the 1960's. But with notable exceptions, far too small in number, my observation is that these clergy did no more wrestling with Williams' book than did the nonspecialized ministers.¹⁸

Hiltner explains that part of the reason for this lack of attention to Williams' work was that many were preoccupied with establishing pastoral counseling as a certified specialty within ministry. The theological reflection and integration issues took a lower priority than the political and administrative issues of the day, such as the establishment of professional identity for pastoral counselors among secular health care institutions of society.

Hiltner concludes, "But in the main, which means about 90%, he was the victim of being a highly intelligent interpreter across fields, who does not get read enough or seriously enough because he offered no one-sided thesis that could evoke partisan espousal or attack."¹⁹ Hiltner felt

¹⁸Ibid., 213.

¹⁹Ibid., 214.

that Williams' work was so balanced in statement and argument that few readers could find many core theses with which to grapple. In short, the book was not sufficiently bold or provocative to gain a wide audience.

Finally, Hiltner offers a fantasy of what advice he would offer to Williams if he were still living, and he could start over on this particular book. Hiltner would have encouraged Williams to assume more confidence in his pastoral skills and to use more data from his own pastoral care and counseling experience in the exposition of his own theological reflections. Hiltner saw the need for Williams' effort in speaking to the needs of the growing numbers of Doctor of Ministry programs around the country: "I would point out that a good part of the reason why every such (Doctor of Ministry) program (good or bad) calls itself experimental or a pilot job is because nobody has yet succeeded in getting the ministry students to relate their pastoral work to their theological reflections."²⁰ He also observed that the Pastoral Care and Counseling field in general, and most of the primary textbooks available in that field were "virtually devoid of any theological reference or connectedness."²¹

Seward Hiltner saw in The Minister and the Care of Souls an important contribution toward theological

²⁰Ibid., 215.

²¹Ibid.

integration for ministerial practitioners; yet he would go no further to take up the content of Williams' practical theological reflections or Williams' agenda for theological integration. My hope here is to undertake the kind of project to which Hiltner alluded, in developing and demonstrating a basic model or means for doing practical theology based on the conceptual foundations laid by Daniel Day Williams.

The Problem

The problem which this dissertation attempts to address may be stated in various ways as a problem of integration: integration of theory and practice; integration of reflective contemplative modes and active modes of being; integration of scientific methodology and theological methodology; integration of the conceptual language of systematic theology with the language of interpersonal dynamics; and perhaps the integration of rational and emotional means of perception and expression.

One of the contexts in which the nature of this problem has become more apparent is that of the traditional practical theology, arts of ministry, or field work courses offered by most seminaries. Seward Hiltner indicated in the article mentioned above that this problem had become particularly acute in the various Doctor of Ministry programs which had only begun to develop at the time of his writing in 1975. While by now there are many more students

applying themselves to such integration tasks, this area of practical theology still appears to be in its initial or infancy stages of formation.

From personal observation, I am hopeful that pastoral practitioners are growing in sophistication in their efforts to address the theological dimensions and implications of their work. More often than not, however, the effort is reflected in a brief paragraph on theological integration tacked on to the end of a verbatim, or an obligatory addendum chapter on relevant theology in a dissertation on pastoral counseling.

One of the reasons this problem may exist is that the practice of ministry tends to take place in the realm of the immediate, while theological reflection tends to focus on transcendent concepts in the realm of the ultimate. When a person is concerned, for example, with learning how to bake a loaf of bread, discussions of Christology, grace, and salvation would appear to be far afield. The effort to relate the two would appear forced and unproductive.

Seward Hiltner gives a good example of this problem in his partial explanation of why Williams' work did not appear to take root among the pastoral care and counseling specialists. As he states it:

The "specialists" (for short) had moved beyond an earlier stage when some had had questions about their identity as ministers. But they were embroiled in or preoccupied with two other kinds of questions: first, getting the whole movement together ecumenically, which was accomplished remarkably well but took a lot of time and effort

by many people; and second, for some but by no means all, establishing pastoral counseling as a certified specialty within ministry. Both these concerns were a combination of the political, the professional, and the structural dimension of the movement. Against them, what chance did theology have for getting first-rank attention?²²

Though his remarks are couched in a critical tone of sarcasm, there is validity in Hiltner's observation. The pastoral care and counseling movement was busy dealing with immediate concerns of structure, organization, and political cohesion. If such concerns opened the door to theological enterprise, this was not always apparent.

This example is probably typical of our tendency to relegate theological reflection to the realm of intellectualization about ultimate concerns, and to limit theological language to that which is generally associated with the disciplines of Biblical and systematic theology. Again the old categories of disciplinary division--Biblical studies, church history, systematic theology, arts of ministry--tend to limit our perceptions of what theology is and can be. (That is, our curricula and seminary structures have taught us, often quite subconsciously, to think of theology only in terms of systematic theology--a field which is dominated by deductive methodology, and a rather self-contained system of abstract conceptualization and language.)

If one's perceptions of theology are so limited, or if the theology to which one subscribes is in itself so limited

²²Ibid., 213.

or circumscribed, then the task of building bridges between the theological world and the practical world begins to demand monstrous and forbidding forms of conceptual architecture.

If, for example, one follows a Barthian model of practical theology, the effort of theological integration is limited to those moments when the word of God is duly applied to a particular situation and therein proclaimed. Theological integration in such a system of perception is not actually so much integration as it is the interruption of an affirmation of faith--sometimes as a non sequitur--into the daily liturgy of human interaction. While this model has its merits, it virtually denies the need for a dynamic intercourse or dialogue between theology and the practice of ministry. Perhaps more of us are stuck in this model than we care to admit. If so, then it is of little surprise that we often strip our gear when we try to shift into theological integration. The act of integration appears fruitless in a system in which the disparate elements are already defined as inert (at least toward one another).

As Hiltner mentioned above, Paul Tillich has been one of the most influential theologians for pastoral counselors and other pastoral care specialists. In particular, Tillich's method of correlation has provided a significant model for doing practical theology. In effect, Tillich saw the realm of immediate experience as the ground of

existential questions to which theology is engaged to provide the answers. Thus, there is a correlation between the existential dilemmas of the human condition and the role of theology in comprehending the ultimate solutions in God. Tillich might find some affinity with Augustine when he said, "Our hearts are restless until they find their rest in thee."²³ The aching gaps in the human condition reveal our alienation from God and the way in which God is the object of our ultimate concern and our ultimate completion or wholeness. Tillich is not an empiricist, however. He does not see human experience or science in particular as providing any data for theological revelation.²⁴

Don Browning describes how Tillich has provided him a model for doing practical theology:

Tillich...also understood pastoral theology as a part of practical theology; it applies the truths of systematic theology to concrete personal and communal situations in the life of the church.... It will be remembered that through this procedure (the method of correlation) Tillich correlates existential questions with theological answers. The existential question, Tillich would insist, contributes nothing to the substance of the theological answer, but a great deal to the form which the answer must take in order to be relevant to the human situation it is attempting to address. Practical and pastoral theology must operate in a correlational fashion; they help form the personal and communal questions which systematic theology attempts to answer. To ask these questions, pastoral theology must use the cultural disciplines of psychology and sociology

²³Augustine of Hippo, Confessions. Trans. Vernon J. Bourke (New York: Fathers of the Church, 1953), I:i.

²⁴Browning, "Analogy, Symbol, and Pastoral Theology," 43.

and what they have to say about the human predicament.²⁵

According to Browning's own explanation of Tillich, the major function of practical theology from his perspective is to raise the significant human questions which systematic theology then answers. The systematic theologian is responsive to practical theology only inasmuch as he or she seeks to find symbols which most adequately translate theological answers in regard to the particular human conditions from which the questions arise. For example, the event of a person's death at the hands of terrorists provides a new occasion to develop language which adequately applies in that situation the general theological answers to the existential trauma of death and grief. Such an event, however, does not contribute (from this point of view) anything new to the theological understanding of death and grief or to the ultimate theological answers to death and grief. In other words, new events may require the pastoral practitioner to develop new skills and new metaphors for communicating theological answers, but these events do not reveal anything new to us about the ultimate nature of the human condition or about the ultimate truth of God.

Daniel Day Williams represents a significant alternative to the above approaches to the problem of practical theology. His grounding in empirical theology leads him to a stance in which he proposes that all

²⁵Ibid., 42.

experience is related to and at some level is revelatory of the ultimate structures of reality. Thus, the data of practical experience and reflection can contribute to a more complete understanding of the whole of reality, and thus, practical theology can contribute to the content of systematic theology.

Williams explained four basic assumptions of his empirical approach:

1. First, by experience I mean felt, bodily psycho-social organic action of human beings in history. Experience includes the sense data, but is not limited to them.
2. Second, God is experienced as a power and process immanent in the world, creating a patterning of communities of value in ways which are describable in rational categories abstracted from concrete experience. The dimension of transcendence is not excluded by this statement; but empirical theology asserts that God is experienced as immanent process.
3. Knowledge of the character of things is derivable from a disciplined critical analysis of the structures in experience and the testing in historical action of theological propositions about God and man.
4. The formal structure of our knowledge always has the status of tentative and correctable assertions, subject to criticism and never exhaustive of the correctness of reality.²⁶

Following the logic of these four statements regarding the importance of experience data for theology, Daniel Day Williams had an abiding interest in the data and theory

²⁶Daniel Day Williams, "Suffering and Being in Empirical Theology," The Future of Empirical Theology, ed. Bernard E. Meland (Chicago: University of Chicago Press, 1969), 176-77.

explosion among the social sciences, as well as in the growing disciplines of pastoral care and counseling. While he was reluctant to identify himself as one who possessed the expertise of a pastoral care specialist, I would contend that he provided the foundations for a practical theology of pastoral care.

Don Browning has acknowledged this about Williams as a practical theologian, and goes as far as to categorize Williams' method of practical theology as perspectival and analogical. Williams himself does not use this terminology (i.e., "perspectival" and "analogical") significantly, but these short-hand terms are adequately descriptive of his approach.

In 1970, Browning outlined the approach of Williams (in affinity with Hiltner) as one of the significant methods for doing pastoral theology:

There is the perspectival (what I would call "analogical") method upheld by men like Seward Hiltner and Daniel Day Williams. This position believes that a theologically sensitive mind can find positive theological insight from an analysis of finite structures of healing, be they pastoral or secular in context. This point of view must not be mistaken for natural theology; it does not assume that reason unaided by the testimony of revelation and history plumbs the depths of empiric reality and discovers religious truth. Instead it believes that faith can clarify its own self-understanding through the process of a dialogue with other perspective on the world besides its own. It supplements the principle of verification by internal consistency of Bible and tradition with the principle of external coherence between the theological circle and the structure of reality discerned by other disciplines. This method is analogical as well as perspectival. It assumes that the world is woven together through a

web of internal relations, the various parts of which demonstrate, on one hand, participating in and possessing organic correspondence with all other parts of the total system. This position likes to talk about preliminary structures and relations; it assumes that the preliminary may have an analogical relation to the ultimate.²⁷

Browning's concise summary includes several statements which will be more fully elucidated in the course of this project. I will begin with an examination of analogy as an epistemological foundation for the model of practical theology I propose here.

Analogy and Experience

As a human being, I find that I work frequently very hard at giving structure and meaning to my experience. I take what I see and relate it to my memory of other things I have seen. I take words and linguistic structures and try to translate them into something I experience and understand. I struggle to find a point of reference which means something to me--which calls forth reference to something I have sensed, experienced, and have internalized in some aspect of my memory. I look for the analogies which help me to relate my experiences (and their attributed structures) with each other in such a way that I may relate myself to them as well.

The process by which I know existence or experience life is so basic a part of me that it seems to be beyond

²⁷Browning, "Analogy, Symbol, and Pastoral Theology," 42.

objectification. Yet I sense that it is a rather sophisticated and complex process. The process by which I come to articulate and explain to others what I know and experience seems to be more difficult and sophisticated. And the process by which I come to know how I know what I know, and how I articulate what I know about how I know what I know seems to be even more complicated and difficult. Nonetheless, it seems to me that the way I receive experience and translate it into knowledge and meaning depends on processes of analogy, memory, and creative construction or synthesis.

At one or more points, these knowing and communicating processes seem to be prone to error. Our language abounds with references to error and to dichotomies between truth and falsehood, reality and unreality, right and wrong. We seem to have our own qualitative scales about good and bad analogies. We talk about distortions of perception and failures and fabrications of memory. We can argue ad infinitum about the value and validity of our creative constructs and our abstract syntheses.

This process of discovering truth and falsehood, good and bad, seems to be at least partially a matter of social context. As we interact with one another as human beings (and this even raises the question of what it means to interact with others as human beings as opposed to something else) we develop common meaning constructs, gestures,

affective modes, language and symbols with which we "communicate."

We may at first have an egocentric point of view or perspective which assumes that other persons experience, know, and give meaningful construction to the world exactly as ours does. In time, through much interaction and growing sophistication of communication, we may come to recognize the existence of many other perspectives on the world which differ from our own sometimes radically. We move from "my world" to "our worlds" (and perhaps eventually on to "our world"). We find that other persons have different kinds of feeling and perceptive analogies, different kinds of memories, and different kinds of creative structuring of meaning.

The dissonances among these perspectives may at times trouble us deeply, shaking the very foundations of our trust in knowledge and experience, and challenging the meanings and values we give to and appropriate from existence. We struggle with the dissonances, trying to resolve them. And where resolution fails, we try to understand and give meaning to the dissonances themselves.

In the interactive process of comparing and contrasting perspectives we generally work toward the establishment of some kind of group consensus about what is true and what is not true. It would appear also that group consensus on truth, meaning, value, and perspective is co-determinative with group cohesion. That is, it would be misleading to

think of one (consensus) in terms of cause, and the other (cohesion) in terms of effect. They are simultaneous properties of the same group phenomenon and are mutually determinative of and dependent upon each other.

What takes place among individuals in the formation of perspectives on truth would seem to be analogous to what happens in the interaction among different groups: comparing, agreeing, disagreeing, fighting, synthesizing, formulating consensus, establishing dogma (forming definitions of social cohesion, plurality, individuality), and developing conceptualizations of reality itself and of appropriate behavior (ethics, law, order, sanity, protocol, propriety) in relation to reality.

What is particularly interesting is that social consensus about some aspects of reality seems to be very difficult to form, and even more difficult to stabilize and maintain. One finds varying levels of reality consensus, different kinds and sizes of consensus groups, and varying qualities of power and authority among individuals and groups.

As individuals interact with various groups they develop their own individuality as well as a sense of identity and belonging. They also contribute to the group consensus either by reinforcing it, building upon it, or in various ways changing, reforming, or totally destroying it. A constant dialogue and tension exists between individual experiences and constructions of truth and group consensus

formulations. Despite the disturbing nature of these tensions, some level of interactive or dialectical process seems to be necessary if groups or societies are to exist socially.

In some groups and societies the consensus formulations are flexible and responsive to creative interaction. And perhaps here also the need for group cohesion may be relatively low. In other groups and societies the consensus formulations are more rigidified, perhaps for the sake of social power and cohesion. And it would appear logical that in all groups and societies, formulations of reality which are most crucial to group power and cohesion would be least available to frequent creative transformation, unless the creative transformation process itself became a central formulation of reality around which the group or society cohered.

Throughout the history of humanity, the theological enterprise might be defined as an attempt among persons and groups to give meaning to their existence and experience at ultimate and holistic levels of structure and perspective. The idea of God as the cosmological creator--the unmoved mover, the Alpha and the Omega, the omnipotent organizer and undergirding of all life and process--represents in some ways the peak of the human quest to find a consensus construct of pervasive power and meaning for reality. The problem with the God construct is that it is one of the most abstract, tentative, and purely theoretical of reality formulations.

Perhaps God is so massive and close to us that it is almost impossible for us to gain the necessary distance or perspective to grasp the whole reality of God. In the same way in which the first photographs of the whole earth from outer space seemed to give us a new tangible or visible conceptualization of the true wholeness of the planet, so we long for such a perspective of God. It is a perspective which is left to the capacity of our imaginations.

God, thus, is one of the most creatively synthetic and one of the least experientially tangible of human conceptualizations of reality. It is a concept which pertains to ultimate meanings and power, and yet rests on the most speculative and debatable foundations.

With the advent of Descartes and modern scientific methodology, the God construct has become more problematic and irrelevant to social consensus. There are still large groups-religious groups, perhaps larger in number than ever before-for whom God is very important, central, and meaningful. And yet scientific and technological methodology quite totally dominate the social meaning constructs of our modern world. Modern science involves a methodology which trusts and utilizes only those constructs which are necessarily and tangibly verified. We have developed very sophisticated, consensually validated methods for determining empirical truth. And we have found growing reward for our investment in those truths. All the more certainly our vast creative progress through scientific

method has led us to a great faith that we are not just determining a social theory of reality, but rather we are working face-to-face with reality itself in very concrete interactive ways. This faith has led to a veritable explosion of scientific energy and technological development in western civilization.

In the wake of this explosion the God construct and the ancient sciences of theology have appeared to become more and more anachronistic. Great numbers of speculative God formulations, held "sacred" over the years, have been proven dubious or quaintly primitive. While several theologies and theological perspectives survive, they struggle with the great issues of pluralism and authority. In the twentieth century at least one small group of theologians have stunningly, and perhaps appropriately, proclaimed that the major consensus God construct of our society is "the death of God." Practical theologians are striving to discover meaningful links between society, its modern scientific orientation, and God. Practical theology represents an attempt to use our more concrete knowledge to reconstruct our speculative abstractions about ultimate reality, and it allows speculative theory to shape the way we receive experience and construct meaning in social context.

Previous discussion in this chapter has alluded to at least three major approaches being offered to the modern theological enterprise represented respectively by Karl Barth, Paul Tillich, and Daniel Day Williams. Barth's

approach consists primarily of disclaiming any possibility of drawing any significant links between the streams of theological meaning and secular scientific method. God is wholly other in Barth's perspective. There is no analogy or abstract construct which leads us to God. Rather God is known to us directly, meaningfully and socially through the person of Jesus. Jesus provides a unique transcendent window shedding light on a world of otherwise dark and distorted experiences. Theology appreciates but does not need the contributions of science. Theology is an independent discipline, standing on its own methodology vis a vis scientific methodology. The practical task of theology is to resurrect the ancient God formulations in modern flesh and to proclaim the eternal truths with unflinching faith, and without regard for the approval or disapproval of contemporary forms of authority.

This is a stance which says flatly: "If theology is anachronistic, so be it. It is the fault of society for losing sight of ancient wisdom, and the responsibility of theology to lead society back to facing this wisdom." This characterization may be overstated for the person and work of Barth himself, but it indicates the kind of methodology which Barth represents.

Tillich's method of correlation²⁸ draws lines of cross-references between points on the two streams of secular

²⁸See previous reference no. 3 regarding Browning's and Tracy's revised method of correlation in Practical Theology, 192.

science and theology. Tillich acknowledges that our society may have grown more empirical and concrete in mentality, but that does not mean that we have lost touch with our existential anxieties about non-being and our ultimate concerns about the meaning of our existence. The same basic questions about meaning and the structure of reality point directly to the answers offered in the Christian tradition. By the method of correlation we find that the God constructs of Christianity still relate to the fundamental issues, problems, and questions of the human condition. The language of each stream then can be used to point to meanings for the other. While the sciences and theology may appear to operate separately from each other, their concerns and conclusions fit together like pieces of a jigsaw puzzle. The integration of theology and science is not so difficult once you adopt the perspective of correlation. The task of practical theology is to help us to see more clearly the bridges and cross-reference points of the two streams and to help persons understand the relevance of theology to their contemporary consensus constructs of meaning and reality.

The position represented by Daniel Day Williams and some other process theologians sheds some doubt on the concept that we are really dealing with two separate streams when we talk about science and theology. Perhaps the waters of each actually mix with the other rather thoroughly. Their dualistic separation is really an illusion. Together

they are part of the same process. They do not deny each other, but rather creatively build upon each other. Theology is in some respects scientific, and science is in some respects theological.

Early in the formation of his own theological perspective Williams saw the concerns of science and theology to be closely related and their tasks to be interdependent. In the files of Williams' private unpublished papers, which are located in the Center for Process Studies at the School of Theology at Claremont, one may find a group of lecture notes on the history of modern science, circa 1943-44. In a lecture outline entitled "Christian Theology and Modern Science," these notes are by Williams.

Thesis: that Christianity and the scientific movement have a profound kinship and interdependence which neither has really recognized.

This means not only that they need one another, but that they are varying expressions of basic values, basic appreciations, a basic spirit which is one.

Does not mean they do not need one another, that science and Christianity are the same thing; for being a scientist and being a Christian are not all of life; but I am saying that uniting in ourselves as individuals and in our activities being Christian and being scientific would be very nearly all that we would need for fullness of life.

First problem is the relation of scientific knowledge and theological knowledge.

The position so far:

1. We know by submitting the ideas arising in our experience to the test of Reason.

2. Reason includes three critical tools: science, philosophy, and common sense.
3. What we know is the realities disclosed in our experience. These critical tools therefore are the instruments of reflection upon our experience, they do not yield knowledge apart from experience.
4. The kind of experience we have therefore makes an enormous difference in our knowing. Sensitivity, appreciation....
5. "Prove all things, hold fast that which is good." I Thess. 5:21.²⁹

Williams' approach presupposes a method of analogy which, as stated above, may be one of the fundamental processes of human knowing. The radical proposition of process theology is that God is like the social creative transformation process itself. We need not develop a static God construct which rigidifies against interactive development. Rather, we can find truth by incorporating creative transformation into the God construct. By allying ourselves with this streaming movement rather than fighting it, we may discover a new meaningful productively integrated perspective on reality--an approach which may keep our experiential knowledge flowing and growing at both individual and societal levels. This approach does not ignore the truths represented by the Barthians and the Tillichians, but simply places them in a context which is

²⁹Daniel Day Williams, "Christian Theology and Modern Science," unpublished lecture notes (circa 1943-44) from the private papers of Daniel Day Williams at the Center for Process Studies in Claremont, California.

developmental, social, creative, and hopefully spiritually realistic.

Again the important presupposition of Williams' analogical method is that Christian faith and empirical knowledge are vitally related to one another. At the opening of The Minister and the Care of Souls, Williams affirmed two main propositions in support of this perspective:

First, the Christian faith arises out of the concrete historical experience of the Hebrew community and the first communities of disciples of Jesus, later called Christians. The faith which gave rise to the Christian community was expressed in the story of Jesus told as the disclosure of God's will to save mankind from the threat of a meaningless, sinful existence. Christian theology is a continuing interpretation of this faith in relation to all human thought and experience.

My second presupposition is that the work of interpreting the Christian faith is never finished. Christ is the Logos, the integrating meaning of our existence. Every aspect of experience therefore presents a challenge to the Christian to learn more of God and his purpose. It is God who is the absolute truth, not theology. No theologian should regard any hypothesis which may possibly lead to new knowledge in a spirit of condescension. He may have something to learn about Christ from any human experience. He holds every particular truth to be subject to examination in the light of the ultimate truth which is given to us--but not possessed by us--in Jesus Christ.³⁰

The function of analogy in this context is to open a relationship of linkage between two forms or entities--a relationship which is symbolic rather than a matter of cause

³⁰Williams, The Minister and the Care of Souls, 12-13.

and effect. Williams especially highlights the possibility here for linkage between a particular truth and a greater concept of ultimate truth.

Analogies can function in several ways for this proposed theological enterprise. First, analogy involves comparison between two or more structures. The similarities and differences between two analogical structures enables the development of connection and separation. By analogy we discover how two structures may belong to the same class or group.

At the same time since the concept of analogy rarely applies to two or more structures which are exactly alike or parallel, then the highlighting of similarities and connections will also invite awareness of contrasts between structures, and therefore, awareness of the particularity or uniqueness of each. One example of the function of analogy in this regard is to draw a linkage between what is divine and what is human in matters of comparison and contrast.

Second, analogy provides a method for creative conjecture. Particular, concrete structures, for example, give rise to conjecture by analogy to abstractions of more generalized yet related ultimate structures. At the same time the examination of particular truth in the light of ultimate truth enables us to give particular structures a context of meaning which is inevitably theological. One example of the function of analogy in this instance is to enable creative speculation about the linkage between the

immediate knowledge of what is human and the sometimes elusive mystery of what is divine.

Third, analogy is a matter of symbolism. In this respect analogy is as much a function of art, perception, and creative enterprise as it is a matter of logical analysis or scientific method. Analogy enables persons to see structures in ever new perspectives and contexts. To consider an analogy between two structures is to discover the insight of a linkage where no linkage may have been previously perceived. One such linkage may open perspective on a whole matrix of interconnected structures. Sometimes a person's perception of reality depends upon where one's attention is focused. Analogy invites a special new focus of attention and opens the possibility of a new portrait of reality.

Finally, the portraits of reality created by analogy provide road maps by which persons may function in the world. The basic test of such portraits is to see how well they work in helping persons to assimilate and respond to experience.

In general what Williams' approach means for a practical theology of pastoral care and counseling is that our parameters are very broad. Virtually every dimension of human experience and learning provides data with which we may engage creatively and analogously in some of the basic constructive work of theology--that of knowing God and ourselves.

Williams' approach also means that theology draws its most important analogies from that which is social and interactive. His approach leads us to ask many questions of basic social experience. When two or more persons engage each other, how do we understand the social meanings and truth constructs which are being tested and developed between them? Is each person's perspective egocentric, or is he or she aware of the otherness of the other's perspective? How are these people dealing with their dissonances and their mutual reinforcements? What new meanings are they formulating, and what new meanings are we formulating by engaging in analysis of their interaction? What are the potentials for creative transformation in their relationships and ours? How does this relate to the larger social contexts and ethical/spiritual issues of our lives? Who is God to us now? Who are we to God now?

Williams' model would appear to encourage a constant interaction between the reflective and active modes of human life. It is important, for example, that we not get so lost in our analysis of experience that we fail to go on experiencing and acting. The crucial interplay between experience and meaning, and between theoretical speculation and practice, dies on the vine if we allow ourselves to get stuck in one phase of the process. One of the unfortunate aspects of many traditional models of theological education is that they may provide a seminarian with a three-years' wealth of contemplative, dissonance-creating academic

abstractions and meaning-constructs without providing or requiring an equal wealth of engaging pastoral activity. Such contemplative-speculative overkill often leaves a seminarian with a shriveled sense of practical authority and a painful hesitation or impotence to act meaningfully.

On the other hand, we can be paralyzed by the hard experiences of another's pain and trouble if we do not have a significant development of theological meaning-constructs in our living memory to give pastoral identity to our actions. This is where we also frequently stumble: failing to find meaningful and valuable theological language and constructive incarnational activity in a secular setting.

The critical challenge to every theological method arises in the practical arena where authority is questioned and the real world accuracy of our abstract constructs is tested. Such a method in theology is analogous to map-making. The theologian assumes the task of drawing maps of reality. Some of those realities are not clearly defined, easily accessed or well charted. Varying experiences and perspectives give us varying images of the same reality. If he or she is to do well, he or she is forced to go back and forth from the drawing table to the realities being mapped or charted. One constantly has to take those maps and test their authority in the setting of their practical usage. One constantly has to question what new data or new development will demand a revision in a map.

For Daniel Day Williams the realm of pastoral activity becomes the proving ground for one's struggle with his or her theological authority issues, and this is the heart of an empirical/analogical methodology in practical theology:

A person may come to the minister with a question or problem which he has heard a hundred times, yet the question of the meaning of human existence is raised anew. To enter with any person into the search for the healing which the Gospel brings means to risk having one's understanding and one's faith challenged. We never know where a new human problem may lead us. This does not mean that the pastor is examining himself every five minutes to see whether he is establishing an authoritative relationship with his people.... We have to go ahead and do what needs to be done, trusting in God's mercy and power. But when the question of authority to speak the words of forgiveness, of hope, and of judgment is decisively raised, we will discover that the crisis of authority is the crisis of faith itself. Without risking our very being in the service of Christ we have no authority to speak in his name. We may rightly stress the positive aspect of this view of authority. The authentic power to be a pastor to another is born out of living encounters with those in need. God gives authority when we are open to his leading.³¹

Williams' approach suggests that each pastoral encounter has potential for being an interactive experience of creative transformation, which can be sensitive, powerful, and deeply troubling for all persons involved. In addition to the affective stress entailed, it is very challenging for us to encounter the dissonances, the questions, the problems; to work at constructive understanding and creative syntheses of meaning and perspective; and to act and live in faith and hope that the

³¹Ibid., 44-45.

creative process will lead to the reality of God, to ultimate meaning and salvation.

The task of practical theology from Williams' perspective is for us to engage each other personally in the context of a community of faith in search for truth and in commitment to responses of love and justice--ultimate principles closely tied to our God concepts. We should eagerly use every scientific tool at our disposal and keep ourselves open to engaging entirely new perspectives on reality. The denial of, or resistance to, this encounter is deadeningly restrictive and leads us to lives which cling to static error--the error of finding a life and losing it, rather than losing a life and finding life. Williams states, "Every human relationship embodies a mystery, and our Christian ministry participates in the deepest mystery of all, the life of the soul before God. We need both the light of faith and the patiently acquired light of empirical understanding if we are to serve God as ministers of his church."³² The exploration of such realms of mystery, as Williams describes above, with the aid of both the light of faith and the light of empirical understanding, is a fair definition of the approach herein to the tasks of practical theology.

³²Ibid., 13.

CHAPTER 2

Williams' Practical Theology of Care: An Overview of Key Concepts

Williams on Healing and Salvation

The fact that Williams finds empirical data and method to be crucial for theology is one of the primary reasons for choosing him as a mentor in the development of a practical theology of the care of souls. Williams saw that the particular, immediate reality structures of a healing experience could be connected to, and revealing of, the larger ultimate structures of theological reality.

Williams opened his study of the care of souls by observing that the immediate and particular events of healing are rather directly connected to and illustrative of the theological construct of salvation. Within his first chapter Williams traces root words, metaphor, and actual experiences which link the works of healing and the theology of salvation. In the Greek New Testament, the words for "save" or "salvation" (sozo, soteria) are in many instances used in the Biblical text to denote literal healing; that is, being saved from disease or demon possession. Other healing words in the New Testament Greek include hygies (to make healthy or whole), iaomi (to heal), and therapeuo (to

serve, treat medically). The fact that the Greek words for therapy and salvation are virtually synonymous, and the idea that Jesus engaged in a ministry of healing as a living incarnation of God's good news of wholeness, provide important clues that there may be for us today an analogy between secular psychotherapies and our theology of salvation.

Williams begins with an important theological statement about the meaning and purpose of pastoral care:

To bring salvation to the human spirit is the goal of all Christian ministry and pastoral care.¹

Williams defines salvation as

fulfillment for man in a new relationship to God and his neighbor in which the threats of death, of meaninglessness, of unrelieved guilt, are overcome. To be saved is to know that one's life belongs with God and has a fulfillment in him for eternity.²

He starts with an outline of the ultimate structures which stand like umbrellas over the fields of pastoral care and counseling. Already we have an important indication of where Williams' method would take us. In the immediate tasks of person-to-person therapy a pastoral counselor is not likely to describe his or her activity in terms of working for the salvation of clients. Both counselors and clients might begin to state the goals of therapy in such terms as relief from conflict or guilt, a better adjustment

¹Williams, The Minister and the Care of Souls, 11.

²Ibid., 13.

to reality, improvement of self-esteem, development of a higher level of social functioning, development of a broader repertoire of social skills, development of more constructive expressions of anger, letting go of the defensiveness of game playing, or establishing more direct, honest, and intimate relationships. Each time a person seeks a pastoral counselor, goals and expectations for their interaction are stated and negotiated. Very rarely does the counselee or the counselor state goals for their therapeutic contract in terms of a movement toward salvation. Williams, however, would contend that the practical and immediate goals are indeed reflective of the broader theological structure of the human search for salvation.

If all such instances of the quest for therapy and healing may be revelatory for theology, then a practical theology of the healing ministries is also critical for ministerial practitioners as they seek to formulate their mission and their response to the need of the other whom they engage in the events of ministry. In other words, if healing activities may inform theological reflection, then that same theological reflection may influence the future of healing activities.

Williams on Christology and Suffering

Christology plays an important role in Williams' practical theology. Christ represents and reveals the kind of humanity toward which we are moving for our salvation.

Christ is the necessary center of our lives inasmuch as Christ is the archetype of our essential humanity. Williams states the issue in this way:

What men seek is what can make life whole. It must be reality present to us as truth and as power. That is what men are really searching for is the Christ, the personal presence of God in human life.³

Thus it follows for Williams that pastoral ministry always finds a significant link between redemptive activity and the Christological core of the Christian faith:

In seeking the integrity of the Christian witness as it bears upon the significance of the pastor's task, we recognize that we need all possible scientific and humanistic understanding of human beings and the way they live with one another. We also know that we need the core of personal knowledge which comes only through response to the redemptive love offered in Jesus. The key to pastoral care lies in the Christological center of our faith, for we understand Christ as bringing the disclosure of our full humanity in its destiny under God.⁴

Williams conceives human relationships as never truly dyadic but, at least, triadic. There is always a reality between persons--"the meaning of existence as it really is"⁵--a reality which is Christological in meaning.

If Christology provides the key to pastoral care, then one is ultimately led to an analysis of the meaning of suffering and the concern of the healing arts to bring relief from suffering. Williams contrasts the Christian

³Ibid., 66-67.

⁴Ibid., 13.

⁵Ibid., 66.

ideal with the Stoic and Epicurean traditions, which have endured in western civilization into contemporary humanistic doctrines of life.

The ideal of the Stoic is to develop an inner strength and insight which is prepared to withstand every pain and and misfortune. There is an image here of a numbing, teeth-gritting approach to suffering. The Stoic does not feel any more than he or she has to--and that which must be felt must simply be endured. The Christian ideal is like the Stoic in the willingness to endure suffering, but the Christian is not concerned with numbing himself or herself as if to build a protective immunity to pain and suffering. As Williams explains it,

Identification with the needs of the neighbor is possible only through a willingness to become vulnerable. Jesus was a man of sorrows and acquainted with grief.⁶

Hiltner considers this theme of Christian vulnerability in conjunction with the grace of God to be a significant contribution of Williams to pastoral theology well before the advent of such developers of this theme as Henri Nouwen in The Wounded Healer.⁷

If identification with the needs of the neighbor through the analogies and commonalities of human suffering is essential to pastoral care, then the Epicurean ideal

⁶Ibid., 24.

⁷Henri J. M. Nouwen, The Wounded Healer: Ministry in Contemporary Society (New York: Doubleday, 1979).

would also appear to be lacking. The Epicurean searches, often in a highly disciplined way, for the creation of an oasis of intellectual, psychological, and material/sensual accomplishment in the midst of the world's chaotic and misery-filled deserts. Most modern academic and culturally sophisticated communities represent some striving after the Epicurean ideal in their constitution.⁸

The purpose of this exposition for Williams is to distinguish the Christian perspective from the humanistic doctrines of various psychological theories which tend to be either Stoic or Epicurean in philosophy:

A strain of the Epicurean search for self-fulfillment runs through many psychologies whose inspiration goes back to Freud's first formulation of the pleasure principle. In the early Freudian doctrine man's vital energy seeks nothing but his gratification.... But Freud, with his realistic sense, saw that civilization cannot exist on the basis of the libido's gratification alone.... Later, Freud thought he had found in the death instinct an apparatus within the self sufficiently powerful to hold it to its work in spite of the pleasure principle. Erik Erikson sees Freud's final doctrine as really a stoicism reaffirmed at the point of the failure of the epicurean principle.⁹

While relief of suffering is an appropriate goal for all pastoral care and various forms of social ministry, Williams points us to the theological insight that this is not the ultimate ideal. Indeed there are dangers in an overconcern with health and healing on the part of the

⁸Williams, The Minister and the Care of Souls, 24-25.

⁹Ibid.

Church. The person who is consumed in the search for "essential self" actually corrupts his or her definition of his or her essential humanity in a paradox of sin.

Williams finally contrasts the Christian stance in which the essence of its faith counters both stoicism and epicureanism:

The Christian ideal of life envisions something higher than freedom from anguish, or invulnerability to its ravages. Its goal cannot be the perfectly adjusted self. In the world as it is, a caring love cannot but regard such a goal as intolerably self-centered. What does it mean to be completely adjusted and at peace in a world as riddled with injustice, with the cries of the hungry, with the great unsolved questions of human living as this? We see why in the end we cannot identify therapy for specific ills with salvation for the human spirit. To live in love means to accept the risks of life and its threats to "peace of mind." Certainly the Christian ministry to persons is concerned to relieve physical ills, anxieties, inner conflicts. But this relief of private burdens is to set the person free to assume more important and universal ones....

The measure of man's life is not his freedom from inner struggle, but his discovery of how the whole of life, including its dark side, can be brought into the service of growth in love. In this sense salvation must transcend all particular therapies.¹⁰

In effect, Williams reveals that while there may be varying perspectives and assumptions of social reality among modern psychotherapeutic theories from which we can learn, we are not obliged to adopt their perceptions especially where they contrast with our Christological analogies and metaphors. In other words, while Williams' theological approach employs a broad empiricism with an emphasis on

¹⁰Ibid., 25-26.

drawing together data from all realms of human experience and perception, this does not necessarily lead us to a massive synthesis of all possible theories and realities. The traditional sources of revelation in Christ and in the Biblical witness do provide for us guidelines for verification or confirmation, and enlightenment of the current reality structures which we are engaging.

Williams' Principle of Linkage

The wholistic, analogical, and empirical method of Williams' practical theology is grounded in what he calls the "Principle of Linkage." The epistemological assumption of the principle provides the key to the model of practical theology which I shall seek to develop and illustrate in the course of this work.

The principle of linkage is a concept of Christian anthropology based on the belief that the human being is a whole and that all parts of the human person are in some way connected or linked with the whole;¹¹ i.e., every part of a person's experience is in some way linked with every other part. Any issue, event, or experience, even those which might appear to be commonplace or trivial, which affect some part of the human person, may be in some way significantly related to the whole person and to the ultimate issues of that whole person's existence. This insight is utilized in some respects in Gestalt psychology wherein even the

¹¹Ibid., 26-27.

slightest details of body posture are seen to be revelatory of the person's whole, or gestalt.

For practical theologians, Williams has noted that such details may be revelatory of theological issues and structures also. For example, we may use common occurrences of life to gain insight into the essence of our humanity, in terms of our nature as sinners or as bearers of the image of God. We gain insight about God as well, inasmuch as God revealed not only in a general way God's essence as creator in the imago dei, but quite particularly in the humanity of Jesus and through the Christ who is in or with each of us.

Williams elaborates his concept of linkage further in explaining that there are two major modes by which the parts of experience may affect the whole of one's experience: (1) direct causal relationships; and (2) symbolic relationships.¹² The direct causal relationship is seen in

¹²Daniel Day Williams, "Myth; Symbol; Analogy," April 11, 1960. In this unpublished set of lecture notes found in the Williams papers at the Center for Process Studies at the School of Theology at Claremont, California, Williams outlines connections linking symbol, sign, analogy, myth and saga. In the lecture notes are these statements about symbol:

"Symbol is not only an epistemological, linguistic, and ontological problem. It is a religious problem.

Our very being as man, our spiritual existence, our devotion, reverence, commitment, and loyalty are bound up with our involvement in symbolic communication.

Without this there is no personality; and no human values.

In whatever sense we know ourselves, one another and God, we do so through 'symbols' which we use; and which constitute our very being" (p. 7).

In these same lecture notes Williams offers a simple definition for analogy: "Analogy; comparable structure between diverse entities" (p.8).

obvious cause and effect linkages in experience. For example, we can see how certain manipulations of body chemistry can have a direct effect upon behavior. We may see how grief is precipitated by a major loss. The second mode involves relationships or linkages that are struck by analogy and association. Williams describes it in terms of symbolic connection:

In the second mode the relationships between experience are mediated by their function as symbols. A struggle to understand another person becomes a symbol of the mind's search for understanding life itself or God himself.¹³

It may be that direct causal relationships and symbolic relationships can overlap one another or can be highly integrated with one another. In such areas of overlap, the connection between structures of healing and structures of salvation may be greater than any separating distinctions. The second mode of linkage, the symbolic relationship, is the mode which is least often explored in terms of its empirical implications for practical theology. In fact, the practical theologian may be the only researcher, among those of many disciplines, who would be willing to accept such symbolic relationships as data for empirical study.

Williams' principle of linkage also boldly builds bridges of unity across common dichotomies, which have been problematic for Christian theology for centuries, such as

¹³Williams, The Minister and the Care of Souls, 27.

the Greek dichotomy between spirit and flesh. To illustrate this bridge building, Williams wrote:

The hunger of the body may become the symbolic expression of the hunger of the soul for God.¹⁴

More explicitly, I would suggest that this hunger of the body would include appetites for sexual union as well as appetites for food. Indeed, as research on psychosomatic phenomena today indicates, the mind and the body are more profoundly integrated in function than the traditional Greek spirit/flesh or soul/body dichotomy would lead us to believe. The principle of linkage would open an understanding of Freud, for example (despite his strains of epicureanism and stoicism as noted above), as a significant contributor to theological investigation in the twentieth century, not only in regard to what he tells us about the nature of human structures of being, but in what this reveals to us analogously or symbolically about relationships and interactions between human beings and God, about healing and salvation, and perhaps about the nature of God. This would be a provocative proposition both to Freud and to some theologians, but Williams, through his principle of linkage, boldly invites such considerations.

What is significant to note here is that Williams is opening the door to a practical theological method which is empirical and yet not purely scientific in nature. Most of modern science is concerned strictly with linkage in the

¹⁴Ibid.

first mode of relationships; i.e., the direct casual mode. While there are several streams of modern psychology in which symbolism is important, the scientific inquiry involved is still focused on direct causal relationships between antecedent causes and behaviors or results.

Williams is inviting us to consider a method of investigation which is not so purely scientific, in terms of studying only predictable links between cause and effect. This method is more intuitive and speculative, more perceptive and creative, perhaps more right-brained. Freud, for example, was fascinated by the revelations of "free association." He used it as a method of uncovering unconscious processes and missing links in cause and effect relationships. In a similar way Williams is fascinated by symbolic or analogous associations of reality structures, and he invites us to pursue the relationship between such otherwise unrelated structures for the sake of some new revelation or meaning or some theological insight.

In particular the search for connection between the structures of immediate experience and the structures of ultimate reality can be engaged in a two-way feedback loop; i.e., each informing the other and building upon the other. A particular pastoral experience, for example, might help me to obtain a new and more sensitive perspective on the meaning of a theological construct such as grace. At the same time the search for symbolic relationships may lead me to new insights or perspectives on that particular

experience which might lead me to experiment with a new stance or behavior.

In this respect the principle of linkage is as important for pastoral care as it is for theology, inasmuch as it heightens our consciousness of, or sensitivity to, the significance of a "part" in drawing us in linkage with the crucial "whole" of human existence. From this point of view, interpersonal events are trivial only inasmuch as we choose to trivialize them. Williams provides the example of a student who cannot produce a paper for a course. While such an event may be commonly and unreflectively processed by both student and teacher, it is possible that this event is linked to some broader problem or issue for the student. As such, the event provides some possible opening or route of linkage for pastoral involvement--both at the problem level of getting the paper in, and also at the problem level of some critical spiritual dynamic. As Williams puts it,

the immediate problem may be the door through which we walk into the arena where ultimate questions are asked and answered. The search for therapy is transmuted into the quest for salvation.¹⁵

If indeed theological meaning structures and actual human experience can be linked, especially in such a mutually informative way, then the essence of a model or method for practical theology already exists. As indicated above, the methodology for this practical theology arising

¹⁵Ibid., 29.

from Williams' work may require more gifts of intuition and art than of rational deduction and scientific analysis. The heart of the model lies in the search for symbolic modes of relationship as well as the causal modes of relationship, as Williams describes them, from which we may begin to build certain statements and speculations of meaning.

There is within Williams' work a broad offering of theological reflection which could provide rich insight for pastoral care and counseling. While I have been tempted to turn this dissertation into a comprehensive overview of Williams' theology, I have chosen to focus much more narrowly on those aspects of his work reviewed above which I believe form the foundation for a valuable model of practical theology in the practice of pastoral care and counseling.

Method and Content

Inasmuch as the concern of this dissertation is to develop a model for doing theological construction through pastoral experience based on the analogical concepts of Daniel Day Williams, the method which will be followed will be largely descriptive, using clinical material from three different kinds of case studies. The first case study follows a format of a presentation for group supervision in Clinical Pastoral Education. It will be used to demonstrate the use of Williams' method in doing theological integration in such supervision contexts. The second two case studies

are fairly substantial in length, and will involve a detailed presentation.

While the three case studies are quite separate from each other in setting, focus, and context, a common theme which will be followed through them focuses on something Williams calls simply "The Minister's Self-knowledge."¹⁶ Williams devotes an entire chapter to this theme, based on the proposition that

Those who undertake the care of souls must attain self-understanding.¹⁷

He raises the question of the appropriate emphasis on the development of self-knowledge or self-understanding in the course of training for ministry. Inasmuch as medical students in training for the practice of psychiatry must undergo psychoanalysis, should not there be a comparable requirement for each ministerial student, he asks. On the other hand, Williams recognizes a danger in too much preoccupation with self-examination to the point that continual introspection may actually inhibit personal growth.¹⁸ With such precautions in mind he concludes,

The aim of ministry is to serve God and his Church, not to fix attention upon ourselves; but without a genuine self-knowledge we get in our own way and in God's way.¹⁹

¹⁶Williams, The Minister and the Care of Souls, 95-121.

¹⁷Ibid., 95.

¹⁸Ibid., 107.

¹⁹Ibid., 121.

Thus, the practical theology entailed in this dissertation will undoubtedly focus on issues of my own identity and self-knowledge, particularly inasmuch as I am the one person who was commonly involved in each of the case studies. At the same time, as Williams suggests, this theme will not consume total attention to the exclusion of other significant symbols and themes.

One possible criticism would be that it is difficult for a person to assume a position of objectivity about himself or herself. One has difficulty recognizing blind spots. This is why supervision is such a key component of any clinical training experience. Each of the case studies submitted below has been processed in the context of group or individual supervision. To that extent these case studies have not been researched and developed in isolation. These case studies have been perfected under supervision; they have been opened to the light of such supervision.

Yet another point in response to the above mentioned criticism is the assertion that it is possible for a person at least to imagine a perspective of objectivity about himself or herself, to take up the point of view of a person in the opposite chair, as one Gestalt technique would suggest, and to learn a great deal about oneself in the process. So to some extent this dissertation will be an adventure in the exploration of my own self-knowledge, and will hopefully provide some foundation for my own reflection

on the appropriate nature of the pursuit of self-knowledge in the course of theological training.

Williams defines self-knowledge in terms of "clarification of motive and search for integrity of the self."²⁰ This clarification of motive and search for integrity of the self takes place in the context of three dimensions of the self: theological, personal and vocational. The theological dimension focuses on the nature of the self in its relationship with God as God's creature. The personal dimension has to do with the self as a unique center of experience with continuity across time and a unique history. The vocational dimension focuses on the self as having something to do in the world, something which involves particular contributions and personal decisions on behalf of the self.²¹

In this regard the concept of self would appear to be almost identical to the concept of identity and identification. It is through the latter term that we see Williams link selfhood and identity with a community of others and with God in particular through the nature and person of Christ. Selfhood and identity depend in part on with whom we identify or to whom we belong. Thus, the search for self and self-knowledge cannot be a totally

²⁰Ibid., 100.

²¹Ibid., 96.

private or lonely pursuit, nor from Williams' Christian point of view can it be solely humanistic:

Human life is set within a history which begins with God's creation of the world and man and ends with God's final acts of judgment and redemption. For every man then the question, "Who am I?" is bound up with the question, "What is God doing in his creation and in our history?" In this perspective personal identity can never be discovered solely within the individual and his immediate personal relations, however important they are, because every man is in a history which embraces the whole creation and what his life means is bound up with that history.²²

From the perspective of Williams' concept of analogy and the principle of linkage, even the most trivial aspect of the search for self or any identification of self in the context of a community of persons can be linked to major concepts of identity, and indeed, even to the identity and image of God.

These concepts of identity and self-knowledge will continue to be raised in relationship to each of the case studies which we shall examine. Indeed the principle of linkage may be demonstrated simply in the way these case studies are linked together at the conclusion of this dissertation.

The first case study is one of a series of case studies done in the context of a program of Clinical Pastoral Education. The focus of this study will be on families involved with a hospital chaplain. The setting involves

²²Daniel Day Williams, "A Theological View of Identity," The New Shape of Pastoral Theology, Essays in Honor of Seward Hiltner, ed. William B. Oglesby, Jr. (Nashville: Abingdon Press, 1969), 76.

ministry in a special care nursery of a church-affiliated hospital. The nature of the ministry in this setting might be described as oriented toward crisis intervention, the kind of intervention which is also frequently in critical demand in the parish ministry. The common crisis in this case is premature birth. This case study will enable us to examine a personal crisis in light of medical research on similar crises. This study will also open the door to some further examination of my own growth in self-knowledge through the processes involved in this particular setting of Clinical Pastoral Education.

The second case study is a study of my own family of origin based upon the concepts now popular among many family systems theory therapists, who find that many issues in contemporary families are rooted in the values and patterns of previous generations of that family. In other words, a marriage usually represents the confluence of at least two family systems; i.e., the families of origin of the husband and the wife. Case study analysis has revealed a linkage between generations concerning certain kinds of values, expectations, behavior patterns, and life-scripts.

For example, a family whose presenting complaint in counseling focused on the school failures of one of its children was examined from the perspective of family of origin theory. The family history revealed that the third of three sons (i.e., a younger brother) in the father's family had been labeled as an irresponsible, ne'er-do-well.

Somehow this family script appears to have been transferred or communicated into the family which appeared for counseling inasmuch as the child identified by his parents as the "problem" also happened to be the third of three sons, who may have identified consciously or unconsciously with his uncle, and who may have been so identified consciously or unconsciously by a father whose expectations set up a self-fulfilling prophecy.

This is just an example of what such family of origin linkages may reveal. The case study presented herein was done in the context of a family of origin oriented course of supervision. The purpose of the study was to undertake an examination of my own family of origin for the sake of enhancing my own self-knowledge as a potential counselor with family systems. The case study involves a brief family history, a family genogram, and an extensive transcript of interviews conducted with each of my parents separately. The value of these interviews and the recording of them has multiplied greatly for me personally since the death of my father in January of 1986.

The third case study focuses on an interview which reviews the case study of a woman who suffered a mastectomy, a second occurrence of cancer, and major depression. Her interview also provides opportunity for some of her own brainstorming about analogies, images, and theological reflections, and reveals their value in counseling process.

Finally, a concluding chapter offers a summary of the practical theological issues which have evolved from employing the Williams agenda in each of these case studies. Then I shall move from these observations toward a proposal, or rather a series of proposals for the integration of theology and personality disciplines in the field of pastoral care and counseling. My conclusions also will focus on the continuing theme of the minister's self-knowledge as it relates to theological education and pastoral care training, and to recommendations for theological education.

The conclusion of this work through a review of the case studies offers to ministers in all contexts of their work a basic, understandable and viable approach to doing practical theology--to thinking reflectively about and responding to the theological dynamics of their ministries in conjunction with the psychological dynamics of their ministries.

CHAPTER 3

Practical Theological Case Study: Special Care Nursery

The previous two chapters established a theoretical foundation for a process of theological integration in pastoral care and counseling based upon the practical theology of Daniel Day Williams. This chapter is the first of three which will offer some demonstration of that proposed process or model in the context of case study review.

The primary case material for this chapter is based upon work which I did as a chaplain intern in a certified program of Clinical Pastoral Education at the Baylor University Hospital in Dallas, Texas. The purpose for its presentation here is to reveal how the theological integration process may be employed in the review of a fairly typical CPE case study, and verbatim.

The original purpose of this case study was to examine the nature and meaning of ministry to persons in a crisis which specifically results from a particular medical situation. This study reviewed ministry with several parents who faced the crisis of premature birth and the ensuing illness of their infants during their stay in the

Special Care Nursery of the Baylor Hospital. For the sake of clarity and focus we shall concentrate on only one of these cases in this chapter.

First some generalizations about the psychosocial dynamics and religious issues which consistently arise in relation to premature birth and high-risk infant illness provide insight and background to the particular case study.

Components of the Crisis

First of all, a helpful observation is that the kind of crisis which arises in the particular medical situation is not really a single crisis, but rather a series of concomitant crises which tend to feed one another. For the purposes of structure and clarity, the following discussion includes six specific crises which are common to this medical situation:

1. The crisis of pregnancy and parenthood
2. The crisis of premature birth
3. The crisis of postpartum depression
4. The crisis of the infant's struggle for survival
5. The crisis of separation grief and bonding by virtue of the child's location in a special care nursery
6. The financial crisis of hospitalization.

The Crisis of Pregnancy and Parenthood

According to Bibring, pregnancy itself is a maturational crisis which must be mastered in order for the

woman to accept her new role as mother.¹ It is a process in which she grows to accept the fetus as a part of herself and then comes to distinguish and understand it as a separate life of its own. If this crisis is not mastered then there is a likelihood of postpartum psychological difficulties for both mother and child.

Also, if the pregnancy is unplanned or unwanted, or if there are significant difficulties in the relationship between the mother and father, then the pregnancy will likely present a crisis which may not be mastered at birth. Braverman² lists six questions which are predictive of postpartum crises and difficulties:

1. Do you feel that your husband or partner does not love you?
2. Do you wish you were not pregnant? Do you have marital problems?
4. Were you severely depressed or nervous after the birth of your last child?
5. Are you single or separated?
6. Was this pregnancy unplanned?

According to Braverman, "An affirmative reply to one or more of the ... questions means that an individual is at risk. These questions have helped us to detect 95% of the patients who subsequently developed a postpartum emotional

¹G. L. Bibring, "Some Considerations of Psychological Process in Pregnancy," Psychoanalytical Study of the Child 14 (1959): 113-21.

²J. Braverman, "Postpartum Depression," The Female Patient (February 1978): 89.

disorder."³ Perhaps the most striking is the discovery that negative emotional dynamics in the crisis of pregnancy are significantly related to, if not the cause of, many premature births. Braverman noted, "Our study also revealed that women replying affirmatively to any of the six questions, but particularly the first two, also had a much higher incidence of prematurity and other complications of pregnancy and delivery."⁴ Most of the medical literature has overlooked the nature of the crisis which parenthood represents for the father. It is not surprising that most of the focus here is on the mother, but we expect more research to be done on paternal involvement and the emotional dynamics of premature birth for the fathers.

The Crisis of Premature Birth

According to Kaplan and Mason, the premature delivery of a baby becomes an extra stress and thus represents a crisis which is superimposed upon the continuing crisis of pregnancy.⁵ They note two components of this stress: "(1) the premature and usually unexpected onset of labor, and (2) the unusual characteristics of the baby delivered."

³Ibid.

⁴Ibid.

⁵D. M. Kaplan and E. A. Mason, "Maternal Reactions to Premature Birth Viewed as Acute Emotional Disorder," American Journal of Orthopsychiatry 30, no.3 (July 1960): 539-52.

In her study of "Parents' Response to Premature Birth," Charlotte Owens notes these factors:

The situation of prematurity in itself seems to evoke in the family at the outset a period of disorganization prior to the mobilization of efforts to master feelings. The lack of the final six to eight weeks' time to complete psychological preparation for labor and delivery makes it difficult for mothers to recognize and acknowledge symptoms of labor. Parents of premature infants may feel the infant has not had time to develop completely and that only a full-term infant can be physically whole. The mother is also weighed down by a sense of having failed in her responsibility to continue the pregnancy to full term and therefore of having lessened the child's chances for survival.⁶

Counter to these findings, a research group led by Nora Smith discovered no significant differentiation between the psychological reactions of mothers of premature babies and the reactions of mothers of full-size newborns.⁷ Thus, some dispute exists as to whether premature birth in itself is highly correlated in some cause and effect relationship with conditions of crisis. Much of the literature seems to support the concept of psychosocial causes for premature birth, thus adding reinforcement to feelings of guilt which parents often experience in such events.

⁶C. Owens, "Parents' Response to Premature Birth," American Journal of Nursing 60 (August 1960): 1113.

⁷N. Smith et al, "Mothers' Psychological Reactions to Premature and Full-size Newborns," Archives of General Psychiatry 21 (August 1969): 177-81.

The Crisis of Postpartum Depression

This crisis is not necessarily a component of the total crisis, but frequently comes to play with great bearing. As we noted above, postpartum emotional disorders may result particularly if the mother is insecure in her marital relationship or if the pregnancy were unwanted. The mother's emotional problems often present a crisis for the remaining family support group, e.g., father, other children, grandparents. Braverman distinguishes between three degrees of postpartum depressive symptomatology:

Postpartum Blues Syndrome--follows approximately 60% of all deliveries. "It consists of brief, transient, mild episodes of crying and a depressed mood lasting 1-2 days during the first two weeks postpartum. In a psychologically vulnerable individual it can precipitate an emotional disorder or aggravate a pre-existing one."⁸

Postpartum Depression--moderate to severe depression following 10%-12% of all deliveries. "In postpartum depression the common symptoms of anxiety and depression will usually be manifested as nervousness, insomnia, anorexia, headaches, crying, continuous sad expression, withdrawal, hostility, and multiple somatic complaints. The infant may be neglected, rejected, or abused."⁹

Postpartum Psychosis--1 or 2 per 1,000 deliveries. "The patient may suffer hallucinations, such as voices telling her to kill the baby, or delusions that the baby is dead, or obsessive compulsive overconcern for herself or the baby."¹⁰

The differentiation in diagnosis between these three is a matter of severity and duration, since they may be similar

⁸Braverman, 88.

⁹Ibid.

¹⁰Ibid.

at the outset. Braverman believes that a persistence of these symptoms for 14 days or more following delivery would probably indicate a need for professional treatment. The concern of this crisis has to do with both the immediate and the long-term mental and physical health of mother and infant.

Since Braverman notes that the predictors of these emotional problems also relate to a high incidence of premature birth, it seems reasonable to expect that one who ministers to parents of premature babies should be aware of and attentive to depressive symptomatology. Ministers would also likely benefit from a knowledge that a significant preventive measure in these cases lies in the establishment of extra nonprofessional support through social and practical arrangements with persons the mother trusts and likes, including immediate relatives, friends, and associates.¹¹

The Crisis of the Infant's

Struggle for Survival

This is the actual medical crisis in the situation. The infants in these cases (including the one in the case study below) are in high-risk--serious to critical--medical condition as a result of their immaturity in physical development. Many of the children in such cases are

¹¹Ibid.

suffering from developmental problems of the respiratory and cardiovascular systems. Frequently they may have suffered brain damage which may not be detected until they have survived several months of development.

One of the most significant psychological factors for the parents is that there are no immediate answers as to whether the baby will live or die. The only helpful predictive factor is the size and maturity of the child. Even for the larger children, however, death may be an immediate danger for several hours or days. The parents are thus left riding or hanging between hope and anticipatory celebration, and despair and anticipatory grief.

A common example of this problem is found in the case of Hyaline Membrane Disease, a very frequent respiratory disorder in premature infants. A 1960 neonatology textbook reports this prognosis in the case of Hyaline Membrane Disease:

Approximately half or more of the afflicted infants succumb. Some of the deaths are due to the disease itself, some to conditions associated with prematurity, such as intracranial hemorrhage, from which these infants are not exempt, or to pneumonia which may be concomitant, but independent of the hyaline syndrome, or may in other instances be a complication of the syndrome. In general the smaller and more immature the infant, the worse the outlook.¹²

In the decades since the above text was written medical teams with the aid of new technology and techniques have

¹²A. J. Schaffer, Diseases of the Newborn (Philadelphia and London: W. B. Saunders Co., 1960), 105.

been able to lower the death rate related to Hyaline Membrane Disease, but there continue to be many cases for whom the attending physician can only offer 50/50 chances of survival. Usually there is an immediate crisis period in the hyaline syndrome for the first 72 hours during which no signs of improvement can be expected. If after that time there is a turning for the better, then a prognosis of survival is good, and the immediate crisis will be relieved. On the other hand, there are so many medical problems possibly resulting from premature birth which may not manifest themselves for several months or years, thus leaving some parents with a continuing burden of concern and a lack of total relief from the initial crisis.

The Crisis of Separation Grief and
Bonding By Virtue of the Child's
Location in a Special Care Nursery

In their study of crisis in parents of premature infants, Caplan, Mason and Kaplan discovered that the most significant factor in predicting a healthy mental outcome for the mother and child was the visiting pattern of the mother. That is, mothers who visited their premature babies in the nursery at least once a week, especially during the last two weeks of the infant's hospitalization, were more

likely to experience healthy psychological readjustment than those mothers who did not visit.¹³

One component of that factor is a good cognitive grasp of the situation:

In the Healthy Outcome cases, the parents continually surveyed the situation and actively gathered as much information as possible about the baby and the causes and manifestations of prematurity The assessment of the situation was maintained in consciousness most of the time, and perceptions were reality-based and minimally distorted by irrational fantasies.¹⁴

A second component of that factor is the accomplishment of parental-infant bonding which can only take place through physical presence and contact. The initiation and maintenance of a good visiting pattern represents significant stress in and disruption of the daily life patterns of the parents. The stress of this separation becomes a "grief response"¹⁵ in the parents of those infants who have been taken a considerable distance from home on referral. In their study of this latter phenomenon Benfield, Leib and Reuter report data which suggests "that an organized family-support program could play a prominent

¹³G. Caplan, E. A. Mason and D. M. Kaplan, "Four Studies of Crises in Parents and Prematures," Community Mental Health Journal 1 (Summer 1965): 149.

¹⁴Ibid., 153.

¹⁵D. G. Benfield, S. A. Leib and J. Reuter, "Grief Response of Parents After Referral of the Critically Ill Newborn to a Regional Center," New England Journal of Medicine 294, no. 18 (April 1976): 975-78.

part in maintaining family stability during the delivery of newborn intensive care."¹⁶

The Financial Crisis of Hospitalization

This final crisis is added to my list as a result of observation rather than research. Frequently young families, especially families in which premature births may occur, are either underinsured or totally uninsured for health care. Even at a Christian hospital which was generous with its services, I encountered two young families who had no insurance and who ran up bills of \$5,000 and \$8,000 respectively for the hospitalization of the mothers and their premature babies. For young families with few extra financial resources, such unpredictable debts no doubt have a devastating impact. Financial pressures can also weigh heavily on the quality of survival of a family unit. Since the above research reveals that premature birth may sometimes be correlated with marital problems, such additional medical and financial burdens may only serve to intensify the problems which a couple is encountering. Similarly at such a time when marital therapy might be most needed, it is least affordable. Therefore, other nonprofessional and inexpensive means of family and community support become increasingly crucial for such couples.

¹⁶Ibid.

Psychological Goals of the
Medical Support System

In their discussion of their program of care for parents of severely ill newborn infants Zachman and Graven¹⁷ of the Neonatal Intensive Care Unit at St. Mary's Hospital Medical Center in Madison, Wisconsin, listed the following basic program goals:

1. Aid parents in confronting the crisis
2. Help parents understand the facts
3. Avoid giving false reassurance
4. Discourage blaming themselves or others
5. Where appropriate, help parents recognize when they need to accept help.

Kaplan and Mason¹⁸ offer these four maternal task accomplishments as essential for mastering the crisis and insuring a good future in the maternal-infant relationship:

1. Preparation for a possible loss of the baby, whose life is in jeopardy--"anticipatory grief."
2. The mother must face and acknowledge her feelings of failure due to not delivering a normal full-term baby.
3. Third is the resumption of the process of relating to the baby which previously had been interrupted ... characteristically at that point at which the mother really begins to believe that the baby will survive.
4. In order to provide the baby with the necessary extra care and protection, the mother must see him as a premature with special needs and

¹⁷R. D. Zachman and S. N. Graven, "Parents of Severely Ill Newborn Infants," Wisconsin Medical Journal 71 (June 1972): 159-63.

¹⁸Kaplan and Mason, "Maternal Reactions," 543-44.

characteristics ... which will yield in time to normal patterns.

Pastoral Concerns and Goals

The pastoral care and management of these crises involve several religious dynamics. A more thorough theological reflection based upon Daniel Day Williams' practical theology will follow the case study below. This section includes other theological and pastoral care concerns reflected in existing literature on pastoral care in cases of this kind of crisis.

In an article on pastoral care to families facing predictable birth anomalies, Donald C. Houts¹⁹ writes of several conditions of human need which avail themselves to a pastoral response. His concepts proved helpful to me in situations of pastoral care with parents of premature infants as those parents dealt with the following conditions:

Ambivalence is expressed in the mother of a premature child who wanted to carry her husband's child, but who expected that child to be normal, healthy and pretty. She wants to accept this gift of life. She wants the baby to live. But can she accept the extra problems and responsibilities which come with it? Can the pastor help her reinforce her positive feelings about the baby as she reflects on the negative?

¹⁹D. C. Houts, "Pastoral Management of Predictable Birth Anomalies," Journal of Religion and Health 13, no. 12 (April 1974): 107-13.

Anxiety is the experience of each parent as he and she wait for each brief word of news and hope. "Will he live? Why can't somebody tell us something certain? How long can we live with all this uncertainty?" A good pastoral response would involve keeping a steady hand and a consistent, reliable presence. Help them keep in touch with the reality of the situation. "You can trust the information the doctors are giving, but no one knows what each new day may hold. We must wait and hope, and in the meantime pray and love him/her while we have him/her with us."

Guilt arises in both the parents. "What did I do wrong? Why is God punishing us? Maybe we don't really deserve to have this child." Here the pastor can "hear confession and mediate forgiveness."²⁰ He or she may help relieve parents of unreasonable blame.

Depression and grief are first related to the parents' expectations of a perfect, or at least normal, child. The second stage comes with their fearful anticipation of the total loss of that child. A pastoral effort to explore sources of hope with the parents without trying to supply them with false hope is a delicate but vitally sustaining maneuver.

Religious doubt is expressed in the question, "If God is good, why would he create a baby who must suffer so much?" "Why does life taste so bitter right now?" In a

²⁰Ibid., 111.

crisis of faith only assertive and genuinely honest affirmations can meet the test. This is significant holy ground: "I believe that God loves you and affirms you as God suffers with you, and in his name I will give you love, affirmation and fellowship in your suffering."

Case Study
Mrs. Pierce and Son

Mrs. Pierce (pseudonym) is the mother of a premature baby boy, born 10/30, who suffers with Hyaline Membrane Disease. She is 29, overweight, and suffers from hypertension--a great danger in pregnancy. This was her first pregnancy in ten years of marriage. As of this writing, I have not met her husband, although he appears to be supportive. Mrs. Pierce was transferred to Baylor University Medical Center in an emergency from Longview.

When she gave birth to her baby she was quite sick herself. Apparently a mistake had been made in her treatment from her doctor. One of the drugs she had been taking, according to her, had actually been putting her and her baby to sleep. Both had close calls, and the baby is still struggling. Mrs. Pierce is a Caucasian, middle to lower class person, who at the age of 29 says she has had enough years for her own life and would be willing to die in place of her baby.

My relationship with Mrs. Pierce was fairly short-term, but in the course of three visits I got very involved in

helping her deal with her crisis. Her release from the hospital on 11/3 represented a time of grief and separation for her, since she would only be able to return to visit her baby by coming in on a bus from Longview on the weekends. Eventually her baby would do well enough to be transferred back to Longview during the second week of November. She apparently has a strong religious background related to her hometown Baptist church.

My first visit with Mrs. Pierce was in her room on Tuesday morning, 10/30, the day after the birth of her boy, Patrick, and her long ride to Dallas from Longview. I came to her room with Polaroid snapshots of her baby taken by the nurses in the Special Care Nursery. She had been so sick, she had not had opportunity to see her baby, and so understandably she got very excited over the pictures.

I also presented her a Bible from the hospital for her son. [Comment: I have come to believe that in many cases the Bible presentation in the midst of the crisis can be an important psychological and theological symbol of hope.] While I was there Dr. Barta, the neonatologist, arrived to introduce himself and report on the baby's medical situation. When Mrs. Pierce asked what her boy's chances were, Dr. Barta responded, "50/50." I stayed on with her a while and prayed with her. I told her I would try to stay closely in touch with her and her baby while they were in the hospital.

My second visit with Mrs. Pierce took place in the Special Care Nursery. After looking for her in her room, I found her finally in a wheelchair by her baby. She told me that it made a world of difference for her to be able to see him, and she asked me to pray for him--and I did. She was quite awed by the appearance of her son. She reflected on the fact that his existence was a miracle, but she was also amazed and very concerned over how small he was.

She told me the story about the mistake her doctor had made--how she and the baby nearly died. I reflected with her, giving her "permission" to be angry over her doctor's mistake, but also we got in touch with her gratitude in being alive and having a baby.

She talked about how much she really wanted the baby, and how much she wanted him to live. She revealed that she had told her husband that if it should come down to a decision between her life or the baby's, to save the baby. I applauded her noble willingness to sacrifice herself for the sake of the child, but I also asked her to focus on the possibility that she could now set an example for her baby by surviving and fighting for life. We also talked about her grief over leaving the hospital and the difficulties she would face in being so far from her baby.

One personal impressionistic issue was my concern with Mrs. Pierce to help her establish some positive attitudes of hope and faith. My operating bias was that she seemed to be a little too fatalistic, a little too willing, from my point

of view, to throw up her hands and leave everything up to "God's will." It was natural for her to prepare for a grieving response, but as I got into my third visit with her I began to get the feeling that she might be getting too pessimistic. Below in verbatim form are some significant exchanges during my third visit with her. The location for this conversation was next to her baby in the Special Care Nursery.

C1. Hi, Mrs. Pierce. How are you doing today?

P1. Well, not so well.

C2. What's the matter?

P2. Well, I'm just worried about how he's doing. I'm afraid he won't make it.

C3. Have the doctors told you anything to make you feel that way?

P3. No, it's just when they say his chances are 50/50 ... that's kind of scary.

C4. It's that other 50 that you worry about.

P4. Yes. He just looks so small. (pause)

C5. Just because he's small doesn't make him any less real, and doesn't mean that he doesn't have a chance to live. There are lots of other babies in this unit who have been much smaller.

P5. There are others who have been smaller and have lived?

C6. Yes. There have been some whose chances have been a lot less than 50/50, and they've made it. So just because your boy is small doesn't mean he can't live.

P6. ... I just get to thinking that if it hadn't been for me getting sick he wouldn't be suffering like this.

- C7. You think that it's your fault that he's not doing well?
- P7. Well, yes. It's because I got sick that he's like this, and I wouldn't want to put any child through this.
- C8. You know, I don't think you can really blame yourself though. You were trying to do your best. I didn't know you while you were pregnant, but I think I know you well enough to bet that you were doing your best to make everything work out right ... that you really wanted this child and loved him.
- P8. Well, I don't know. I've lived a lot of years-- I'm 29 years old. That's a lot of life, and there's lots of things I could have done wrong in that time.
- C9. You think God might be punishing you for something you once did?
- P9. Yes.
- C10. Well ... I can tell you at least what I believe. I don't think God is going to punish this life for something you did in yours. I believe that God loves you and that he loves this baby. Whatever you may have done wrong, I think he is willing to forgive you, if you are repentant--if you want to be forgiven. And I believe that by his grace he wants the best for you ... I believe God is with us right now, suffering over the pain we're going through. And I believe that whether your baby lives or dies he's in God's loving care.
- (pause)
- P10. I can't understand though, if he loves him why he'd let him suffer.
- C11. Well, that's a tough question. It's hard to explain why any of us have to suffer, but we do.
- P11. But he hasn't lived long enough to do anything. It can't be his fault.
- C12. Yes, well, I don't think it's necessarily his fault or our fault. It just happens to be a part of the way God has made his creation. He operates with certain rules and he gives us certain freedoms. It's not like we're puppets on a string and everything happens because God makes it happen. You know when people are in a car

accident, I don't think it's necessarily because God is punishing them.

P12. No, I don't guess so.

C13. And I don't think God is going to decide to let your baby live or die according to whether or not you're a worthy person or a worthy mother. I think he knows how much you love and want this child, and I think he's with you on that. We just have to wait and see and hope for the best.... I think the important emphasis for right now is on hope and faith....

P13. Yes, maybe I ought to think a little more positively.... I just want him so much.

C14. I know.... You want him and you're just all the more afraid of what could happen.

P14. (nods affirmatively) You know if he makes it through this, he's going to be awfully spoiled. (smiling now)

C15. (smiling with her) You think you'll want to make it up to him for all this?

P15. (nods, smiling affirmatively)

C16. Well, you don't have to worry. You're already doing your best. If you're a good mother, he'll know that you love him. (pause) Well, I'll keep him in my prayers. We mentioned him in our prayers--all the chaplains did--this morning. I'm going to be going on for now, but I'll see you again tomorrow. I won't be here when you leave Saturday. But as I said yesterday, I'll visit your son every day while you're gone ... and I'll pray for him, and I'll tell him that you're thinking of him and that you love him.

P16. (She starts crying.) Thank you. That would be nice.

Immediate Reflections of the
Chaplain Intern (R. Kiser)

Although this may be too early to tell, I believe that this was a crucial pastoral conversation. I did a lot more talking than I usually do with parents or patients. I think

that it was important for me to stand my ground and express my concerns in order to give Mrs. Pierce some sense of strength, hope, and support, particularly where her concepts were providing a negative, unsupportive background to her crisis.

From a critical point of view, I seem to have been leading her quite a bit, even when I could have waited for her to clarify further the points she was moving toward. For example, I might have asked, "What do you mean when you say, 'He's so small'?" There was a movement in this last visit from inquiry to a gentle confrontation, and on to catharsis, support and affirmation.

I shall not be seeing Mrs. Pierce very much, now that she has been discharged, but I do believe that I have left her with a sense that she has a friend and ally looking after her son in the hospital. In this respect, particularly, I believe my ministry with her was positive and successful.

I see Mrs. Pierce as a person who has a deep and awesome sense of love for her son, but a great need for him as well. After hypertension and possibly other difficulties have prevented her from having a child through ten years of marriage, this baby looks like and probably is a miracle. A great amount of her happiness and self-worth are bound up in having this baby. She is even ready to die as long as she has had the fulfillment of bringing a new life into the world.

She found it difficult to cope with the idea that the outcome of her son's illness was uncertain. She kept looking for signs that would lead her to a definitive answer. Through her sense of guilt and failure, she began to believe that death was the most likely prognosis. I tried to help her cope with the theological dimensions of her guilt, to disassociate her guilt from her baby's suffering, and to communicate to her a gospel of grace and hope. I believe she was very open to the use of faith resources and that she saw in me as a chaplain a person whose presence was meaningful and whose prayers were efficacious.

Theological Reflection

The method for theological reflection is an empirical approach derived from Daniel Day Williams and based on the assumption that all experience is related to, and at some level is revelatory of, the ultimate structures of reality. Thus, the data of practical experience and reflection can contribute to a more complete understanding of the whole of reality. As Browning explains, the assumption of Williams' method is that the preliminary may have an analogical relation to the ultimate.

What Williams never accomplished was a practical demonstration of what he had explained in theory as an approach to practical theology. It is at this point that this dissertation attempts to build upon his foundations.

Inasmuch as there are probably numerous ways to make use of Williams' insights, what follows is hardly considered to be exhaustive. I believe that the process discussed below might best be used for brainstorming in a small discussion group or seminar format.

In the case study of Mrs. Pierce above perhaps the first question we might ask is, "What are the analogies and associations which come to mind here?" "What is symbolic?" Below are listed some possible answers.

List of Analogies and Associations

1. New birth of a child and its analogy to spiritual new birth.
2. Baby's suffering opens questions of the meaning of suffering from preliminary to ultimate.
3. Relationship between suffering, punishment and guilt.
4. Her sense of responsibility for her sickness which likely led to the premature birth is analogous to the Biblical statement that the sins of the fathers (and mothers) are visited upon the sons (and daughters).
5. Symbolism of premature birth--what is premature?
6. Miracle of birth and life--association with the passage at John 16:21 encouraging the endurance of suffering like the woman in labor who endures but no longer remembers her pain, for joy that a child is born into the world.
7. Birth as a new responsibility.

8. The mother's awe at the tininess of the child leads to reflections on the parable of the mustard seed and the image that the Kingdom of God is born of small beginnings.
9. Analogy to Mary and birth of Christ into the world.
10. There is the Christ in each new child born into the world. Those that are born suffering, seemingly innocent, are most reflective of images of Christ on the cross.
11. Importance of prayer. What are the analogical structures here? Prayer as communication, dynamics of expression, the ultimate link between the individual and the whole--the whole body of Christ.
12. Images here also of medical technology in life extension for children born prematurely. Analogies of technological progress versus analogies of destructive technological manipulation. What are the ethics of extending such a new life by means of modern medical technology-especially if at great expense? Are we now through medical technology populating the world with children whose permanent medical/physical/emotional problems may be a burden to society? Are we instead saving lives that may make great contributions to their families and to humanity in general? By saving one individual are we not saving the ministry of Christ?

13. What is the linkage between saving life medically and the theological concept of salvation? Is the relief from suffering not always our goal?
14. What is symbolic in the chaplain's attempts to instill positive thinking in this situation for Mrs. Pierce? Is it linked to avoidance and denial, or is it linked to faith and a more positive form of self-fulfilling prophecy? Following the concept of crisis as outlined in the preliminary portions of this chapter, how are the dynamics of this particular crisis linked to the greater crises of the human condition and of the relationship between God and humanity?

Theological Commentary and Elaboration

Since the above menu of topics suggests many possibilities, we shall next focus upon a few which appear to be worth further discussion.

First, let us examine further the phenomenon of new birth. As was stated in the case study, the birth of this child to Mrs. Pierce was a long awaited event. Some of her medical problems, such as those with hypertension, had been delaying or impeding the birth of a child. There may well be other circumstances involved which were not revealed in the course of pastoral conversations with her.

The obvious point, however, is that at the age of 29 (see verbatim P9) Mrs. Pierce considers herself to be a woman of advanced years, and that the birth of this child is

therefore especially cherished. There are analogies here to women of the Bible such as Sarah, who laughed at the prospect of bearing a child in her late years, or Elizabeth, who was considered barren and too old to have children.

The image may be compared to the image of God bringing forth new life in the desert. In the barren places and the unlikely places, new life can still come forth with God's help. The image is an image of hope.

The hope in this particular instance is contrasted with the circumstances of the child's birth, so premature and delicate that the chances of survival are reduced to 50/50. So while there are signs of hope, the battle is definitely not completed. The chances of victory are still in doubt. All that is counted precious in this gift of new life could still be dashed by the power of death.

Could this be an opening to other new beginnings in this woman's life? Certainly there are possibilities. What they are at this point is open to speculation. While she is preparing herself for the worst, she also knows that if the baby does survive she will celebrate this remarkable gift. "You know if he makes it through this, he's going to be awfully spoiled."

There is a window here to other new beginnings in her life, perhaps especially a new beginning in her relationship with God. A baby's birth becomes a possible time for new birth of the parents as well. One event is linked

analogically to another. While there may also be a causal relationship, the connection is more simply symbolic.

Another major point for theological reflection here focuses on the problem of suffering. The issue of suffering in itself seems to be universal, and therefore each individual instance of suffering would appear to provide the sufferer a link with the whole of humanity and the problems of the human condition. Each instance of suffering has its own unique fingerprint, and the characteristics of that print are worth observing.

In this particular instance the suffering of a newborn child is especially troubling to a person who looks for cause and effect relationships. Mrs. Pierce realizes that the child cannot be morally responsible for causing his own suffering, so by assumption she moves the blame back to herself.

At P8 she states, "I've lived a lot of years--I'm 29 years old. That's a lot of life, and there's lots of things I could have done wrong in that time" She implies that there are some old mistakes or sins in her life which are haunting her, and which could be the reason why God is allowing this to happen to her right now. Her own theology of connections, even if she assumes them to be cause and effect connections, opens the door to further exploration of her guilt feelings, her self-conception, and her understanding of God and her relationship with God.

Instead of inviting her to elaborate and to explore the analogies and connections, however, I as chaplain in this instance was quick to push another kind of theology: "I don't think God is going to punish this life for something you did in yours. I believe that God loves you and that he loves this baby. Whatever you may have done wrong, I think he is willing to forgive you, if you are repentant--if you want to be forgiven. And I believe that by his grace he wants the best for you.... I believe God is with us right now, suffering over the pain we're going through. And I believe that whether your baby lives or dies, he's in God's loving care" (see C10).

This response brought closure to any further discussion about guilt. It did however shift the focus from a theology of punishment to a theology of grace, and therefore raised anew the question of the problem of suffering: (P10) "I can't understand though, if He loves him why He'd let him suffer." (C11) "Well, that's a tough question. It's hard to explain why any of us have to suffer, but we do...."

Perhaps this is an instance where Williams' concept of linkage, not by cause and effect but by analogy, is most useful. If we can for a moment suspend the question of the why of suffering, and look solely for its analogous images and connections, we may find some illumination by which the preliminary is linked to the ultimate.

The Christological images here are particularly striking. Inasmuch as our Christian imperative is to see

the Christ in others, the image of Christ is especially visible in a seemingly innocent suffering newborn. In speaking of the person in need, Daniel Day Williams states, "This person is Christ himself standing before the minister. Christ, the Son of God, is in reality present wherever man is ... wherever men are living, hoping, suffering. The text here is Jesus' word, 'Inasmuch as ye have done it unto one of the least of these my brethren, ye have done it unto me' (Matt. 25:40)."²¹

At another point Williams states that while relief from physical ills is an important goal, especially when it frees us to assume more important and universal burdens: "The Christian ideal of life envisions something higher than freedom from anguish, or invulnerability to its ravages."²² Again he says, "The measure of man's life is not his freedom from inner struggle, but his discovery of how the whole of life, including its dark side, can be brought into the service of growth in love."²³

Suffering may be an essential part of the human condition, but it is an image which is hard to bear when we are dealing with the form of a premature newborn, hardly any larger than the size of an adult hand, with his mouth

²¹Williams, The Minister and the Care of Souls, 40.

²²Ibid., 25.

²³Ibid., 26.

stuffed with a respirator tube, arms outstretched and tied down, intravenous needles puncturing his body.

One father expressed the image more poetically this way:

I find it hard Lord
agonizing hard
to stand here
looking through the glass
at this my infant son.

What suffering
is in this world
to go through pain of birth
and then through
pain of knife
within the day.

What suffering
is in the world
this never ending
pain parade
from birth
to death.

He moves
a bit
not much
how could an infant
stuffed with tubes
cut sewed and bandaged
move more than that?²⁴

To say that the image of this infant's suffering is Christological is seemingly profound. One can draw a link according to Williams²⁵ between suffering and salvation. The Christian faith has proclaimed across the centuries that a link exists between Christ's suffering on the cross and

²⁴Joseph Bayly, "A Psalm at Children's Hospital," Psalms of My Life (Wheaton, Ill.: Tyndale House, 1969), 21. Used with permission by David C. Cook, Elgin, Ill.

²⁵Williams, The Minister and the Care of Souls, 26-29.

our salvation, and further, between his suffering and ours, and between ours and his. To know this may not relieve the pain, but by some mystery of God's ways it may instill hope.

(P11) "But he hasn't lived long enough to do anything. It can't be his fault."

(C12) "Yes, well, I don't think it's necessarily his fault or our fault. It just happens to be a part of the way God has made his creation. He operates with certain rules, and he gives us certain freedoms. It's not like we're puppets on a string, and everything happens because God makes it happen. You know, when people are in a car accident, I don't think it's necessarily because God is punishing them."

(P12) "No, I don't guess so."

(C13) "And I don't think God is going to decide to let this baby live or die according to whether or not you're a worthy person or a worthy mother. I think he knows how much you love and want this child, and I think he's with you on that. We just have to wait and see and hope for the best.... I think the important emphasis for right now is on hope and faith...."

Can the suffering of an infant in the Special Care Nursery actually be a sign or symbol of hope? With the help of Williams' practical theology and the principle of linkage, we may actually begin to see such a possibility. More importantly, the doors for further exploration of that possibility are opened to us simply because we have stopped to consider the analogy, not necessarily as a matter of cause and effect relationship, but simply as a matter of symbolic connection. Symbols, according to Williams, do have important theological functions. In this case the image of a premature infant as a Christological symbol strikes to the depths of our humanity.

With the above image in mind we may have a new perspective also on the ethical questions raised on the brainstorming list above. What are the ethics of extending such a new life by means of modern medical technology? Are we actually creating more suffering and pain for this child and for his or her world? Are we now through medical technology populating the world with children whose permanent medical/physical/emotional problems may be a burden to society? Are we instead saving lives that may make great contributions to their families and to humanity in general? Are we not saving the essence of the ministry of Christ? What is the symbolic or theologically analogical link between saving a new life and the quest for salvation?

Williams defines salvation as "fulfillment for man in a new relationship to God and his neighbor in which the threats of death, of meaninglessness, of unrelieved guilt, are overcome. To be saved is to know that one's life belongs with God and has a fulfillment in him for eternity."²⁶ In this perspective the ethic to save life, if the technology is reasonably available to do so, seems appropriate. The question of "at what cost?" remains difficult and subjective.

Perhaps one of the most profound and provocative conclusions from the above theological process would be to say that this particular infant not only symbolizes but

²⁶Ibid., 13.

mediates Christ and salvation both to the mother and to the chaplain during this particular event.

Inasmuch as a significant portion of this case study is oriented toward the concept of crisis and the chaplain's response to crisis, it is appropriate to consider how Williams' analogical approach may be helpful even in the midst of a crisis response. Especially when one of the components of the crisis is a dissonance in the structure of one's belief system or a direct confrontation of one's concept of reality, Williams helps us to move theologically beyond simple cause and effect relationships. In this particular instance a theology of cause and effect forces the issues of guilt and blame for suffering. Even if we were to place blame on the sin of humanity through the ages, this doesn't give us much help regarding the suffering of a premature newborn. Giving ourselves permission not to have to figure out cause and effect or blame in this instance frees us to explore other images of a theology of love and hope.

The Christological images of crisis intervention take us from Christ casting out demons to a chaplain trying to cast out panic and to instill comfort and peace even in the midst of a life's struggle with its own suffering and the suffering of another.

Implications for Pastoral Practice

The theological reflections presented above offer several potential implications for ministry. Perhaps the most significant and the most applicable to other situations of ministry is that the analogy which links the infant's suffering to the suffering of Christ can serve to transform an experience of alienation into one of reconciliation.

The question of why suffering happens is not addressed through this analogy, but at least the implication is that a person's suffering, even that of a baby, is never totally unique and therefore, one never suffers alone, except in his or her own perception.

At P10 the mother expresses her concern: "I can't understand though, if he (God) loves him (baby), why he'd let him suffer." Her question about why God allows the suffering of her son puts her at a distance from God, and lays responsibility for such suffering upon God. Whether or not her stance or perception is theologically appropriate, it creates for her a problem of alienation. Her feelings about God could include anger, disappointment, grief, abandonment.

If the chaplain were to have opened up some of these potential feelings behind the statement at P10 instead of responding to the question with an immediate theological discourse about the chaplain's perceptions of God's nature, he might have discovered that some of these feelings in this woman's particular experience were related by analogy to

feelings she had had in other important relationships and turning points in her life.

Her feeling that God has somehow let her down here might remind her of feelings about her parents letting her down, or the way in which other important authority figures or love figures in her life had disappointed her (perhaps the father--definitely her physician).

Whether or not this potential linkage could open up any productive pastoral conversations or ways of healing is purely speculative. The implication here, however, is that theological reflection through the use of analogy opens new alternatives and points of linkage for the chaplain or pastor to follow in pastoral interventions.

It is likely that in this particular event in ministry analogy might not only open the way to significant theological reflection, but also lead the way from theological language and symbol back into a greater depth encounter with an individual's personal history and real experiences of pain and suffering.

From such a depth conversation, the chaplain could share visions of the way in which God joins her and meets her in her suffering, encouraging her to move beyond the first impressions or projections of a God who abandons her in her suffering or who inflicts suffering upon an innocent infant.

CHAPTER 4

Practical Theological Case Study:

Family of Origin Project

The previous chapter included some examples of the proposed model of theological integration in relation to a pastoral care case study set in the context of hospital chaplaincy. That case study included a brief verbatim from an event in ministry, and an analysis of the event from the chaplain/student. It was fairly typical of the kinds of case studies examined in supervision in most programs of Clinical Pastoral Education.

This chapter includes the primary data and discussion of a much more lengthy case study done in the context of training in pastoral counseling at an independent counseling and education center. This case study is not based upon a particular event in ministry, as was the example offered in the previous chapter. Rather the focus here is on a student's self-understanding through a study of his or her own family of origin.

The following case study is based upon a personal examination of my family of origin in an attempt to elucidate family systems theory. The primary data for the study consisted of two one-hour interviews with each of my

parents. These interviews were conducted in Welch, West Virginia, at my parents' home.

My father's sudden death in January of 1986, has heightened the value of this study to me personally. In the time since this document was written my mother has retired from teaching. She continues to live at the family home in Welch.

Most teaching theory in the practice of counseling emphasizes the importance of growth in self-knowledge. The assumption is that difficulties, if not dangers, will arise for a counselor who enters into a therapeutic process with others without a good understanding of his or her self and his or her functioning or coping skills.

Daniel Day Williams in The Minister and the Care of Souls devotes an entire chapter to the subject of "The Minister's Self-knowledge."¹ He proposes that the practitioner of pastoral care may need to engage in processes for the development of self-knowledge similar to those employed by teachers of counseling and therapy in the psychological and psychiatric disciplines.

He opens the chapter with the following observations and questions:

"Physician, heal thyself." Those who undertake the care of souls must attain self-understanding. We have seen how the counselor's inner life is involved in his healing ministry. The pastor can obstruct the work of grace if he does not

¹Williams, The Minister and the Care of Souls, 95-121.

understand himself or his people. That is why churches, theological schools, and laymen are taking a new look at the preparation of the Christian minister. Have we kept theological study in clear relation to the issues of life? The medical doctor who becomes a psychiatrist must undergo his psychoanalysis. Should there be a comparable requirement for every minister? How should psychological testing and theory come into the course of theological study? Some believe that the theological curriculum, with its heavy emphasis on the traditional disciplines--Bible, Theology, Church History--should be radically revised, and that the methods of teaching should be altered to bring the student more quickly to face the question of his faith's relevance to contemporary life. There is increasing interest in field-work experience, clinical training, and similar methods of providing encounter with living problems in theological study. Our task in this chapter is to see what basic principles are involved in the minister's achievement of self-understanding and his growth toward maturity.

The word frequently used to describe what we are seeking here is "self-knowledge." It is a good term, combining as it does the Christian concern for the person with the psychological emphasis upon facing the self. Self-knowledge includes but transcends intellectual understanding. It means recognition of one's motives, fears, hopes, and habitual reactions. It requires emotional balance, the capacity to face one's past, confess one's limitations and capacities, and establish one's ultimate loyalties. But in a Christian perspective all this is related to man's knowledge of God.²

The following case study was done in the context of group training in family systems theory at a pastoral counseling and training center certified by the American Association of Pastoral Counselors. The purpose of this study was to enhance the development of self-knowledge in the context of an introduction to family systems concepts of counseling.

²Ibid., 95-96.

This study is included here as primary material for demonstrating the concepts of theological integration discussed in Chapters 1 and 2 above. This chapter builds upon the work done in Chapter 3 by offering more extensive case material, and by offering a focus not on the dynamics of an event in ministry but rather on the self-knowledge of the minister. While most case studies in pastoral care and counseling allow for some examination of the person of the counselor or pastor, this family of origin study was designed specifically for the purpose of a pastoral counselor's personal growth in self-knowledge.

The following study is presented with an introduction which was written at the time of the interviews. Please note that this portion of the study was written at a time which preceded my father's death. The concluding portion of this chapter is a discussion of some portions of this case study according to the model of theological integration which I propose.

Family of Origin Project

My parents and I constitute the whole system of my family of origin. At the time of these interviews my parents lived in Welch, West Virginia, a town which had been their home since they married in 1949. My father was 68 and had been retired for three years. He had over 40 years with Krogers as a grocery store manager. My mother was teaching 7th and 8th grade earth and biological sciences at Welch

Junior High School. At 58 she was too young for full Social Security retirement, but she was considering an early retirement. She already had almost 40 years logged at teaching in the same county school system.

I am their only child, born in Welch in 1951. I went through public schools there, and first left home after I graduated from Welch High School in 1969. At the time of this study, I was a United Methodist minister, serving as associate pastor at Travis Park United Methodist Church in San Antonio, Texas. I was not and have not been married.

My parents met each other in a small coal mining town called War, in southern West Virginia, following World War II. My father was the fourth of 12 children. He grew up back in the mountains of Virginia on a small farm. His father taught in a one-room school house, and worked the farm--about 100 acres--with the rest of the family. They lived at a bare subsistence level, building their own log houses and getting by with handmade tools. The education values of my grandfather were so strong that when the oldest children were old enough for high school, they all moved to War--about 20 miles away--in order that the children could continue their education. All 12 children completed high school, but only two of the girls and one of the boys went on to college.

Shortly after this move, their father Elbert developed symptoms of a fatal disease which deteriorated his muscles--probably muscular dystrophy, but I am not sure a diagnosis

was ever made. As he deteriorated, the older children took on extra responsibilities to support the family financially. My father worked part-time with Krogers while in high school and stayed on after graduation to become the store manager at age 19. His steady work and financial support carried the family through a rough crisis period which coincided with the Great Depression. By the time he was in a position to be relieved of family support responsibilities and to realize his dreams to study engineering in college, World War II had evolved, and he was drafted.

My mother was the youngest of six children born to immigrants from Austria-Hungary. Her father was a coal miner, and the family lived in a coal camp house--in a town not far from where she now lives. They were part of an Eastern European immigrant community which worshipped in a Russian Orthodox Church. During the Depression her older sisters moved to Binghamton, New York, where relatives helped them find jobs in the factories.

When my mother began her first year of college at Concord College in Athens, West Virginia, her parents moved to New York to join the families of the older sisters. After two years of college, at the age of 18 she went back to her home county to teach in an elementary school. She is the only member of her family who stayed on in southern West Virginia.

While working at her first teaching job she took room and board in a house virtually across the street from the

Kiser family. When the Kiser boys came back from the war, she and my father managed to meet and start dating. Their courtship lasted nearly four years. They began their married life in Welch, the county seat town, where he managed the local Krogers and she taught 5th grade. For the first 14 years of their married life, they lived in a small four-room, fourth-floor apartment. While we lived there, we were very close to and involved with a family whose adult daughters lived in apartments on either side of ours. One of these families had a daughter (the only child and only grandchild) eight years older than I, who became surrogate sister, playmate, and girlfriend to me as a child. Both families finally moved on to new and larger living spaces when I was about age 12. My parents did not buy their house until I was a senior in high school.

When I was about three or four years old, my father was seriously ill with circulatory problems in his legs. He decided not to take the risk of surgery to have his veins stripped. From that time he wore support hose and took medication for treatment. One month before his 65th birthday, a severe case of phlebitis forced him toward a decision to retire.

Through continual support and urging from my father, my mother completed her college degree and then made plans to work on a master's degree, an M.S. in education. She completed her credits at West Virginia University in Morgantown during the summers of 1961-63. The university was

about eight hours from my hometown. My father stayed in Welch to keep the house and mind the store, while my mother and I lived in a small apartment near the WVU campus. It was their only significant time of separation in their married life. I attended lab school classes in the mornings and learned to swim at the student union in the afternoons.

When I was about five years old, I was diagnosed to have a congenital defect of the aorta called a coarctation--an arterial constriction which leads to complications and death in young adulthood. Surgery was recommended for my early teen years when I would be near adult proportions. So I prepared and waited for the operation for over eight years. The surgery was conducted in 1965 at Johns Hopkins Hospital in Baltimore. Following the surgery a serious staphylococcus infection developed on my left lung. I survived a near-fatal touch-and-go battle, and got out of the hospital after a stay of about 35 days. This was a significant turning point in my physical condition as well as a major psychological landmark which reinforced my pilgrimage toward a religious vocation.

After graduation from high school in 1969, I moved out of the family home. Since that time I have lived in several different cities, in four different parts of the country; have completed two degrees, experimented with law school, started a Ph.D program; and have worked part-time or full-time in ordained ministry with a variety of churches.

The Case Study

Interview of My Mother, Helen Murin Kiser

R. The first is kind of an interesting question.... We've talked about this before I think--ah--What was life like for you when you met Dad?

M. What was life like for me...mm. It's pretty hard to describe really, because uh that was my second year of teaching, and I was still learning really to be a teacher. I really wasn't interested in men, or interested in going steady with anyone. Yet around a small town there was very little to do other than go to a movie, stay home, grade papers, and that was just about it. (Laughs) There was no ... what you would call fun things to do.

R. How old were you?

M. I was 19.

R. So this was your second year at Concord (College) and then went to War (name of the town)?

M. I went to Concord when I was 17.

R. Right.

M. And I really had--because I went to summer school--I had better than two years of school, and I taught on what they called the Third Class Certificate. (pause)

R. So it was like you were there in the small town and you were still pretty young.... What was it like to be starting out teaching at that age?

- M. It really was a unique experience for me because you see I was totally on my own. I had no one...no parents around...
- R. Yeah, your Mom and Dad were
- M. Mom and Dad were up in New York. I was completely on my own. I had to do all my own thinking and planning. And being the baby of the family I didn't have this to do before I started teaching. I always had guidance and assistance, and all of a sudden the whole responsibility was mine.
- R. Hm.
- M. And the realities of economics and living--all of that uh
- R. Uh-hum. Nobody was looking after you like they did....
- M. Nobody was looking after me. I had to look after myself. I had...had to grow up in a hurry. I had to grow up quite a bit. And uh I always was mature for my age, but along certain lines the knowledge and the maturity hadn't come together.... But it sure did then.
(Laughs)
- R. (Laughing with her) ... And you were living with your roommates then, right? ... The whole time?
- M. That's right. There were a group of us teachers who lived together ... in private homes.
- R. And how long did you and Dad date?
- M. (Laughs) Oh, dear.... It sounds like a long time, but we didn't really see that much of each other. Ah we

started dating ah what amounts to 4 years--almost 4 years. But uh we didn't see each other in the summer times because I would go home up to New York state--or I would be in summer school. So I didn't get to see very much of him. And then because of his responsibility I didn't see him every night. We had a standing arrangement of dating (laughs) which was Sundays, Wednesdays, and Fridays (laughs) and that's about the only time we had to see each other.

R. Hm.

M. It was the kind of thing that worked out well for both of us.

R. How did you decide that he was the one you were going to marry?

M. It's just one of those things that you ah you just develop. I didn't plan it, and I didn't think of it uh that he was the one. And I don't think that he decided that. We just sort of grew together and our ideas developed. After a period of time we found out--well you know--this would be a nice kind of a house, or this is a nice kind of furniture and.... We started talking as--and he hadn't even asked me to marry him really--he just assumed that I was going to marry him--and I just assumed that we were going to be married. But we never really talked marriage.... But we did a lot of uh what would be called today pre-planning--uh searching each other's ideas out and what our values were--what our

attitudes were about certain things, what we expected....

- R. You sort of talked about...being married without actually going through...you know, the formal discussion of it.
- M. We uh, well it was more of a really trying to find out how the other felt about certain things. I think it was good, because I really wasn't really as mature as he was.... He was ready for marriage about the second year that we were dating, and had gotten a nice vacation trip to Florida. And he mentioned the fact that it would be nice to make it into a honeymoon. And, of course, I really wasn't ready, and I knew I wasn't. I knew that when I got married that it would be for life. I was... I had made up my mind that once I got married that I would work at it and that that would be it for me. I did not want to make any mistakes and uh of course your Dad was very mature. He knew exactly what he wanted out of life.
- R. He was ready to go huh? (Laughs)
- M. (Laughs) He was ready for marriage and of course uh the fact that he is a little bit older than I... He experienced a lot more of life and being in the service that uh he looked back and--and being responsible for the family as he was since his dad died, he took a lot of the family responsibility. He knew...he knew what responsibility was and.... It was on the other hand...

it was a little bit different for me. I have always been a responsible person, but also the fact that I did not feel what the older members...such as your Aunt Mary and Aunt Jay...what they had to learn as responsibilities--the large responsibilities in life, I was not prepared for that, because of course being the youngest in the family again as I said it was just one of those things that...and I realized it. I realized that I understood that I was responsible and I did not want to get myself tied into something that I knew that I could not live up to.

R. How did your life change--after thinking about that--how did your life actually change after you did get married?

M. Mmm I think I became...I've always been uh a serious minded person um...I had always to some degree goals for myself that I did not write down, but I mentally I had certain ideas that I wanted to fulfill and uh of course that was to have a good home uh and have a family. And I really looked for anything--never have, never--still not a kind of person who looks for exciting things and different, something new--those things are nice, but uh basic to life I, the uh important things in life are what was important to me.... Being happy what you're doing...having the necessities of life. As long as I had those I thought that was the important thing.

- R. Well, as far as concerning responsibility--did you find that you had more responsibility--or that your sense of responsibility had changed?
- M. I think that I grew up quite a bit--because uh Dad began to shift some of the responsibilities onto me. He took care of all the business for us to begin with. Then little by little he began to shift responsibility to me. And in other words that's the time at which I became his private secretary from which I have fired myself many times-- And the, the resignations and retirements do no good whatsoever. I'm still his private secretary (laughing) but he uh he in a very not demanding, but a very firm loving way would just say, "I want you to do this." And I think it was good because he was really preparing me for any emergencies where I would have to take care of those things, and I would know how to do it. Ah, so many women are lost when they have responsibilities. So I little by little began to take care of everything--even to buying his clothes which I had not ever done in my life, was to buy clothes for a man. And that was, that was a funny thing because before when we were first married I was going to buy your dad something, and he says, "Now wait a minute," (she laughs) "I've always done my own buying, and I will continue to buy." And then little by little he couldn't get to the store. I'd say, "What size shoes do you wear...what style?" I'd copy the

number of the style on the box of his favorite style,
and then I'd look....

R. "Nunn Bush," right?

M. At his clothes...yes, Nunn Bush size 10 1/2D
(laughing)... and I looked through his clothes and
looked at the sizes that were on there, and I made a
little notebook to put those things down, and then I,
when I saw he needed them, I began to buy them...to the
point that I even got brave enough to start buying
suits, and hats and...everything, really...to the point
where I spoiled him. (we laugh) He doesn't want to go
out and buy.... He knows I'll do it.

R. Uh hum...ah.... What happened when I came along?

M. Oh! Oh! The greatest thing in the world. I've...Dad
and I've talked about that so much...that a, that
people who choose not to have children may have a good
reason, but we would not have it any other way. In
fact before you were born, we talked when we first
married, about how nice it would be to have triplets,
because we thought it would be so nice to have three
children, at least three children. And wouldn't it be
so nice to have three at one time, and uh just have a
family and immediate family...and of course that didn't
happen.

R. Did you know at that time that you weren't going to be
able to have any more than one?

M. Ah no. Ah no.

R. Was that a decision that was made?

M. Ah no...no ah. When uh I found out.... When I went to the doctors suspecting that you were on the way, the doctor asked for your dad to come to the lab. And Dad thought that was strange. He said, "Now wait a minute... you're the one we think's pregnant, not me. Why should I go to the lab?" (laughing) But the reason for that is ah, I have B Negative blood. And uh, because of the Rh factor they had to know what Dad's blood type was. And of course, his was positive; so at that time we didn't have the medicine, ah not medicine but whatever it is that they give now to a person to a woman who has... to keep the antibodies or whatever they're called from forming. And uh Dr. Villani cautioned me that it would be well for us not to have any children for a while...and explained the problems with the lack of an Rh factor on my part and Dad being positive. Uh Dad began to do a lot of reading, and one thing he didn't want to do... was to father a child that was mentally retarded...uh so, by choice at first.... We deliberately uh decided not to have any more children. But after that, uh we would have liked to have had a lot more, but it just didn't happen...and uh (pause) so we, in other words it was, it was really by choice in the beginning, but after that it just, it just didn't happen. And we felt very fortunate with what we got. (more cheerful)

- R. So how did that change things...when I came along?
- M. How did it change things.... Oh, it's very difficult to express in words just how it changed. I remember so well, that ah, after I got out of the hospital with you that...you were born on Saturday. And I was so anxious to get home. Oh I wanted so much to come home, and I couldn't wait to hold you and do things for you, because in the hospital you were limited to how many times I could see you. And uh Dad insisted he thought I needed someone with me. So he...took me over to War to ah Mommy Kiser's. And I really wanted to...go home where we lived, but ah I was over there. And Kirby, your Uncle Kirby asked me that same question. He said uh, "What has this done to you--how has this changed you or has it changed you?" And all of a sudden you feel very responsible for a life. Ah you're so afraid of doing something wrong. And you ah (laughs) especially with someone with a first child--I know a lot of people who express this--you just keep looking at the baby to make sure it's breathing. And uh...it's a, it's excitement. It's a, it's responsibility. It's joy. It's hope. You start making plans for the future. All of a sudden you start reading magazines for parents, and you read articles on training; and you try to think back on them and the kind of training you got. You want to make sure you do the right thing...that you make no mistakes, and you know you're

going to make them, but you hope to avoid as many as possible. So it's a, it's a mixture of um all kinds of emotional feelings that you have, but a on my part it was oh...it was just... it was just joy really. When I was a little girl growing up I never wanted a little baby doll like most girls did; I just wanted a piano. (laughing) But a I had baby dolls. But with a real baby doll it was quite different. I just enjoyed it ever so much. Ah I knew too there were things that a I didn't want to leave you. I didn't ...I was so afraid something was going to happen to you.

R. Uhum. Was it difficult for you to go back to work?

M. Ah very. Ah in a way it was difficult, because uh...and I knew that if I didn't go that I would probably be home. And I felt like, that after you started school I would want to get back, and I would be so far behind in my thinking it would take me quite a while to get updated. It was a decision that ah wasn't easy to make. But with your dad coming home at lunch time.... In other words, I stayed home with you, and then it wasn't--you took a nap, and then your dad would come home then I was home. So because we worked it out, we...there was someone with you during your waking hours. And you had a way, which I don't know if ah...if you worked it out yourself as most babies do, but you worked your schedule to suit yourself with us. In other words, your feeding schedule, your sleeping

schedule, you ah made your own schedule. We couldn't put you to a schedule. You made your own. And so therefore, the schedule you made just suited us fine, because you stayed up late at night time with us, and of course that was just perfect for Dad, because when he came home it gave him plenty of time to see you. We didn't attempt to put you in bed at a certain hour. And when you did you slept a little later, and got up in the morning about the time we got up. So we got to enjoy you a lot more than a lot of people who insisted on a strict schedule for their babies. (pause)

R. So you didn't have a uh strict schedule for me. You just kind of let me do what I wanted to do.

M. That's right. I let you ah...you were that kind of determined person anyway.

R. (laughing) I was?

M. You were. Very definitely. You very definitely had your own a.... It was very strong. You could sense it. You had your own mind made up about certain things as a small baby, very definitely.

R. Hmm. Like what? In addition to schedule?

M. In scheduling? Ahm, anything you wanted to do, if you didn't want to do it you had a way of turning your head, and that was it. Ah...I couldn't ah even for example when I wanted to hug you (laughs), and you didn't want to be hugged at that time, you would have a way of squirming and turning your head away from me.

So I knew that, that that's not, that you weren't ready for that or that you didn't want it that moment, that was too much really. You had a way of letting me know. You ah didn't have to say a word, but you sure said a lot (laughing), with your behavior, your actions.

R. Well, going along on that, what was I like as a child?

M. Ah, you were a very happy child, a very happy baby--ah, never complained, and never fussed...always seemed to enjoy things. You got a lot of...a you seemed to enjoy the things that we did. I remember one time we were getting ready to go on vacation, and you were (laughing) ...we had you on the bed in the bedroom and Dad had his suitcase on one side of the bed, and I had my suitcase on the other side of the bed...uhm we were packing things getting ready ah and you were just as happy as a lark. You sensed that we were doing something different, that we were going to go somewhere. And you had a way of rocking back and forth (laughing). And you'd rock, and somehow or another you fell...got a bump on your head. I remember that so well...but ah you, you just joined in with anything that we did in such a happy way. I never had to be concerned about you being lonesome. I was concerned to a degree about that because where we lived there weren't too many children. Mary Clark (neighbor) was I think about the closest to your age, which was what about 6 or 7 years older than you?

R. She was 8 years older than me.

M. Eight years. And uh really and truly you ah, my concern was that you'd be lonesome, but you always managed to find something to do. You always ah...you seemed to be inventive...give you a toy, and you made something else out of it besides what it was. It was something else to you; it wasn't just what it appeared to be. And uh, for example your little step stool. And you would turn it upside down and it wasn't a step stool any longer. It could become a plane or a car or whatever you wanted it to be. Always imagining...you used your imagination quite well. And never tired of playing. You remember what you told me one time?
(laughing)

R. Yeah, what did I say?

M. Oh I think you saw me working so hard, and you told me that you didn't want to grow up. And I asked you, "Why not?" And you said, "Because grownups don't have any fun." (laughing) All we do is work. (laughing) (pause)

R. Ah were there any particular crises or difficulties for our family ah when I was a child?

M. I don't know how old you were--you were about 2 or 3--Dad could tell you that. But he didn't feel well. And I think you sensed his not feeling well...and he didn't want to show that in front of you. But I think you could sense it. He lost quite a bit of weight. And he went up to Cleveland Clinic, with Uncle Charlie, to

check on his condition. And of course he was having trouble with his legs then. He was just on his feet too much. But he lost a lot of weight. And we were concerned, and he was concerned especially as to what would happen to you. He always felt, always wanted to make sure that you were taken care of should something happen to him. (There was an interruption here and we cut off the tape for a few minutes.)

- M. It was a feeling that I never got over with to this day, because it ah, the whole thing--and you've heard probably Raymond ah talk about this--was like that. It began as a miracle (she had backed up to talk about her feelings about being pregnant and giving birth), Well, I just wanted to tell you that the summer that I was carrying you, of course this was before I knew that you were on the way--I took a course in swimming, and I had a course in ah, local flora, and of course that required field trips of about an hour and a half. And so I would go to ah a science class, this was ah college, and then I would go walking for an hour and a half, and then I'd take a break--and, 'bout a 15 minute break--and then I'd go swimming for an hour and a half. So I had a awful lot of exercise. And of course when I did find out that you were on the way, I asked the doctor if that exercise would be too much for me. And he said no, "Continue; it's not going to hurt you a bit." He says, "Do you feel all right?" And I said, "I

feel fine." And ah, I never, except for one time, never had any morning sickness. I felt terrific; I felt better then than I had ever felt, an, in my life actually. But ah when, when we knew you were coming, and Dad took me to the hospital, everything was developing so naturally, that the nurses got after Dad, because you were on your way. Your little head was appearing, and here I was, I wasn't even in the hospital in time. They got after him. And he said, "Well, I brought her out here as soon as I could." But when you were born, it was about 5:20 in the morning, Saturday morning, and ah after you were delivered, the nice thing they did for us...they didn't take me off to a room and you to another room. They said, "Now if you'll just wait," and they took me to a room just outside the delivery room, a little private room. And they told Dad, "Now you stay right here. We don't do this for everybody, but we think you're going to enjoy this." And they brought you, and they hadn't even cleaned you up--just as you were delivered. And I think that that was something real, real special. It meant so much to both of us, because we didn't have to wait to see you. We saw you then. And ah, then after they let you stay with us, oh about 5 or 6 minutes, they said, "Now we've got to take him. We've got to clean him up," saying, "Then he'll be real pretty." Because we thought you were beautiful, anyway. But

that was a real special time. And it was a, the whole thing was so beautiful. I didn't have any of the pains that most women have. It was natural child birth, without me knowing that I was doing all the right things--all the exercise I did, and all the swimming I did was the right thing for me to do. I had no pains. I had no aches. Ah (laughing) Dr. Villani said, "You should have a dozen as easy as you've had this one." But it ah...that moment together after you were born meant so much to us. It ah, I could tell by Dad's expression. I knew he wanted a boy so much. And yet he was so determined that the sex of the child would make no difference.... And he was, he would have loved a girl just as much, I'm sure. But I knew, ah we immediately decided on names.... Before you were born we had a name picked out for boy or a girl.

R. Uhum. What was the name you had picked out for a girl?

M. Would you believe either Sue Carol or Carol Sue...but ah this is where Aunt Dorcas ah, took the name for Carol Jane. She asked me. She said, "Now that you didn't have a little girl, can I use the name Carol?" I said, "Help yourself." (laughing) (pause)

R. We were talking about when Dad was sick....

M. The crisis, right. Ah he was concerned about you growing and as a future, and that's when he really started pushing me that ah I was going to have to get my doctor's... I mean my masters degree. He wanted to

make sure that... ah this is one of the things that was a decision on my part to go back to teaching after you were born, because we felt like in an emergency, if I had to work, I would have a job and be able to care for you in case something happened to him. So really that was one of the reasons behind our planning, to make sure that, that there would be, you'd be taken care of. But ah, other than that there were no serious crises that I know of. Ah I think the time that you fell, running a race around the dining room table, and you fell into the radiator, do you remember? About 6 or 8 stitches or so. I don't remember how many. And I came home and I almost fainted when I saw that patch up on your forehead.

R. How, how...there were some decisions being made, like your going back to school and so forth.... How did you make those decisions? Did you make those together?

M. Together.

R. How did you divide up responsibilities between each other?

M. It's always been easy for your Dad and I to make decisions, because we, ah seem to...I think that four years we dated, we did an awful lot of talking, and I think that that's what brought that about, the fact that we did a lot of talking about everything. We talked about our views on life, what we expected out of life, what our views on religion, if we had children--

if we were married, if we had children what we would hope for them.

R. How did you decide on religion as far as that's concerned?

M. We agreed that ah, ah for the time being that ah each would not ever push the other into going to a particular church. In other words we were thinking in terms that we agreed that yes, the best thing would be to...both of us to the same church, but Dad said, "Now it's going to be your decision. I am not going to push you. Whatever you decide, we will go along with that. So this is the kind of thing ah that even after we were married...we, Dad didn't say, "Now we are going to go to this church." And I didn't say, "Come on, we're going to go to this church." We respected each other's opinion and ah decided that we would, we would talk things out before we came to a final decision, and that's what we did....

R. Did you ever have...something that it took you a while to resolve the differences or that you had to work through quite a bit?

M. On matters between the two of us? (Uhum) Not really, except for...and he left it like I said, the religion issue. Ah we did want to ah have a church that we would both go to. We had seen a husband go to one church, and the wife to the other, and we didn't think that that would make for a happy home. Ah we felt that

uh, that was very important even if there weren't any children for two people to be able to worship God side by side, rather than.... And we had seen that you know, Rocky and Gin Sexton, each went to a separate church, and we had seen several couples, and we just decided that that wasn't for us. But ah, I can't think of anything of any... the only thing that Dad kept insisting, and I'm glad he did now, was that I not put off too long going back to school and getting my masters. Ah I did investigate about kindergartens and nurseries up in Morgantown (location of the state university) when you were about 2 or 3. And I couldn't get any good word. The people I asked weren't that knowledgable about what was available. So I decided you were just too young for that. And I'm glad we waited till the time we did, because I think you benefitted from it--from my getting my masters (laughing).

R. How did I do as a kid? How, how did I do? Did you worry about me? Or ah....

M. No...you really took care of yourself. I laughed about it the other day because ah you know Aunt Jay used the system of ah with Ron and Joanne as they were growing up, and I decided now that's a pretty good system: if they misbehaved they had to sit in the corner. And ah the first time I did that with you, I didn't want to spank you, and it's, it's not easy to spank a child,

and I didn't want to. And I knew that you had to learn what was no and what was yes. So the first time you did that I had a little chair there, and I explained to you, "Now any time you do something that you're not supposed to, this is where you're going to sit.

(laughing) I found you sometimes going there without me telling you to. You decided to take care of your own punishment. (laughing) That was so cute, one time you sat there and I didn't even know you were there. You had done something; I guess you had decided it was wrong. You went over and you were standing. Your little chair wasn't there. And I heard, "Mommmeeee." I thought, "Well, where is he now?" Because you loved to play tricks on me. You loved to hide from me and have me come hunting for you. And ah, I thought, "Well, he just wants something." And you came out with another very plaintive, "Mommmeeee"--you'd sing loud--I came there. "What is it you want?" "May I come out of the corner now?" And I didn't even know you'd been in the corner. You put yourself there (laughing). That was pretty cute.

R. Self-incriminated....

M. Right.... But one thing you did that really scared me.... Oh you really, and looking back it, it petrifies me even now to think about it. We used to have a plastic bag which we hung our clothes in in the closet. And you had unzipped that, and how you got up to

that.... You managed to get up to places that no kid could ever do. And you unzipped that, and put yourself in there and zipped it up. You couldn't reach high enough once you got in the bag. It's a garment bag...and I missed you. I looked everywhere. I looked under the beds, under the dining room table, everywhere in the corners, everywhere you used to hide from me. I went out on the porch; went down into the courtyard; looked everywhere; went over to the neighbor's. Nobody had seen you. I called out and you wouldn't answer. You were very quiet. And I went up on the street, and looked down and up and down the street to see if you...that wasn't like you to do that. And so I called, and by that time I think you were getting tired of not being found. So I called out, and you said "Here!" I couldn't find out, and you wouldn't tell then. I had to hunt. And I don't know what led me to the closet, because I had gone to the closet and opened the door and didn't see you. And I looked again everywhere in the house, cause I knew you were there. You wouldn't answer when I called you. You had decided you were going to give me a hard time. And I don't know, I recognized a little bit of a bulge in the bag that I hadn't noticed before, and unzipped the bag, and there you were laughing at me. Oh you thought that was so funny, because you thought you had really hidden yourself in a good place that time. And that was

really scary. And I told you, you know, not to ever do that again, because you weren't getting enough air. And you never did do that again. But ah that that....

R. I think I remember that.

M. Ahh, that's scary even now to think about it. And the other time that you scared the life out of me...you were very independent in the first grade. You grew up; now you were going to school, and you didn't need your mother to walk beside you. And we were coming home, and every day, I told you and I kept thinking in terms if ever you had to go to school or come back without me sometime that the danger of crossing the street over to the apartment building.... And I always told you, "Don't cross where the curve is. Wait until you get to where you can see both sides and look up and down and up and down the street to see if any cars are coming before you cross. And you always wanted to get ahead of me. You skipped. You fairly skipped to school and skipped back home too. And this one time--do you recall that?

R. Hm em (no).

M. We were almost near to the curve. And I kept--you were about six to seven feet ahead of me always. And I told you, "Now slow down. Wait till I catch up with you. Don't cross the street. You can't see; you can't see around the curve." And you bolted out--right at the place where you shouldn't have. And a truck, a little

pick-up truck--the man who was driving it saw you, and he put his foot on the brake, and I know that he came little of hitting you. And I, my heart went up to my throat, and I was so scared. And of course, I screamed--and I did finally get a voice. And I took you and I said, "I'm not going to do anything to you now, but you just wait till I get you home...(we're laughing). And after we got up in the apartment, I told you, I said, "Now you're going to get punished, because you did something I told you not to ever do." And I said, "Before I tell you what you're going to get punished for, you're going to tell me what I'm going to spank you for." And I made you tell me (laughing). And I gave you three little spanks with my hand. And ah, but that scared me so. Ah really afterwards I just shook all over. I am the kind of person that I can hold up well. I'll look strong, boy. About a half an hour or so after it's over with, I turn weak and my knees just give out, and I just collapse. I'm that kind of person, and that's what happened to me then. The reality of the whole situation just got to me and I just collapsed practically...uhh!! (then laughing) That was a crisis!

R. Yeah, I know....

M. The other crisis was of course, Dad went to a meeting. I believe he went to Roanoke. And he had told me, "Why don't you take Ray Doug over to Mommy Kiser's and spend

the weekend, instead of staying here by yourself?" And he said, "I'll feel better knowing that you're over there with her, and I know she'd enjoy having you and Ray Doug with her." And I thought, "Well, not a bad idea." So after school Friday, we ah, I packed up a little bag, and we went to the bus station--wasn't too far. Caught a bus over to War. You had a little cold. And ah, that night I was going to take you and go to the ball game, but started coughing. So I decided no, I'm not going to go to the ball game. And I, ah there was something in the cough that I sensed was quite different from just a regular cold. So next morning, I told Mommy Kiser, I said, "I'm going to go back to Welch with Ray Doug. I'm going to take him to the hospital. Something's wrong, and I don't know what it is." And she said, "Well, I think it's a good idea." Course I came home, and took another little bag, and took you out to the hospital. And ah Dr. Castrodale checked you. And he...I don't think he really knew at that time what was wrong, but.... I had left a note at home for Dad that I had you in the hospital, and for him to come out when he got back from the meeting. And of course he wanted to keep you in the hospital overnight, and I stayed with you. And ah, when Dad came out--of course he was, that was quite a shock to him to come home and read a note saying, you know, that you were in the hospital. So he wanted to know

immediately what's wrong, what's the problem. And we didn't know quite what it was. And Dr. Castrodale recommended that we let him make an appointment for you down--where was this in Richmond at ah Virginia Medical College Hospital. And I didn't know why he recommended that because he had not graduated or gone to school there. But he made an appointment, and ah when we took you down there the doctor told us then that you...couldn't find the femoral pulse. And of course...checked you out. And he had been in surgery for about 12 hours. He had done surgery on a blue baby--the so-called blue baby. And he had...was worn out, and we felt so sorry for him. But he took the time, he was so kind and took the time to explain to us what your situation was, and that ah nothing should be done at the time. That ah, just not to let you get overtired, not let you get any kind of infections. If you did to bring you back immediately, anything like that developed. But this was the kind of thing that was recommended as far as surgery was concerned, ah after you got into your teens. But that was ah, ah kind of a thing that was ah it stayed on the back of our minds. We worried about it. We didn't try to show our deep concern to you, because we wanted you to lead a normal life as much as possible. I think one of the heart breakers for me...you were in about second grade,

third grade, wanted to go out for Little League. I don't know if you remember that or not.

R. Uh hum (yes).

M. You came up to me. All the boys were going to go try out for Little League, and ah I decided well, I knew you weren't going to make the team. And I told you, "You can go and you can try, but don't be disappointed if you don't make it. It's not the most important thing in this world." And you were determined that you were going to go. And you went. And when you came home, I saw the disappointed look on your face. But you said... you seemed to take it nicely though, you said, "I couldn't even go half way around the field and I was tired and the rest of the boys made it around the field more than one time." Because they had you run, part of it, to see what your endurance was. Of course you didn't have that endurance. So ah, when you weren't looking I had my private cry.

R. (Reacting) Mmm.... Ah, how did I do when I was in Junior High and High School?

M. I think you did very well. I think that as far as... eh Junior High and High School? Ah you were, you were always and still do give us a lift in our life. You look at the bright side of a thing. You look at the happier nature of a situation--ah if that's what you want to call it. You always certainly put us in the middle of your plans cause ah.... One thing I noticed

that you did beautifully.... You're a nice little diplomat. You never wanted to, and I always tease you about it and Dad teases you about it. But you never wanted your Dad to think that you loved your Mother more than you loved your Dad, and then vice versa. You were very careful about showing your feelings to us. You didn't uh...then...but (laughing) if you will recall anytime Dad was running around the dining room table or through the apartment or through the house (chasing her), you always took his side (laughing). Any time we were playing in fun you couldn't stand the idea of Dad not being able to catch me. You'd always help him out...put a chair to block my path or close the door; make sure I couldn't get away (laughing).... But you, you showed a careful balance of your feelings in not only to us, but I think to all your cousins. You tried to show ah...ah. In other words you were careful in your demonstration in your, of what you felt towards people to make sure that everybody was thought of.

R. Hm!

M. And that you did, like I said, at an early age. Ah all way through. Ah in Junior High School. Oh! I should tell you something. You've taught me a lesson. This is a dilly and I remember. When you were in the third grade, for your art. I think Mrs. Propst had you, had a mold of an Indian. And you poured plaster in that.

Then afterwards you were supposed to paint. And you were never neat (I laugh), And when it came to painting within the lines. You wanted to get the job done. And ah, there were little bubbles in the plaster, little holes. And you hadn't painted quite to the edges, but it was, oh as far as you were concerned it was the most beautiful Indian, and you were so proud of that thing. You brought it home...Indian with all its different colored feathered headpiece. And there were those little tiny white specs here and there. And you had your watercolors with you. And I said, "Now here, Ray Doug," I said, "Let me show you, let me take a brush here." And without even stopping to ask you or tell.... I picked up that brush and I said, "See touch these little white places like this." And you said, "Now it's not mine anymore. You've done touched it." (I laugh) And another thing, any time I would say anything to you about homework or anything you would say, "No thanks, I'd rather do it myself." You always...you didn't want Dad or me to do anything for you. You said, "I'd rather do it myself." Wanted no help. And I remember when I required a science project for science fair, if you'll recall? I didn't see you working on yours. (laughing) And I said one time, "Are you working on your project? You know that that's due?" "Yes, ma'am." You didn't give me any indication that you were working

on it. (laughing) You didn't even want me to see what you were working on. You remember what you made?

R. Was it that Solar Dish?

M. That's it. (laughing)

R. Ah it wasn't much, but it was something. Well, what was it like to have me for a student?

M. I really didn't want to have you as a student. I asked Mr. Richardson, I said, "Mr. Richardson, please," I said, "Let another teacher have him." "Nah, Helen it'd be good for ya! Be real good for you." And I said, "Yes, it might be good for me, but it might not be so good for him." He said, "Ah it's not going to bother you a bit. You might learn something from this." And he definitely wasn't going to make any changes. So I came home and talked with your dad. And he said, "Well," he says, "I don't think it should be a problem to you. You shouldn't let it bother you at all." So I had a talk with you. I told you what Mr. Richardson said. Then I said, "Since you're going to have to have me, I'm going to have to have you in class; I have one thing that I want you to agree with." I said, "This might give me an opportunity to learn as a teacher. Things that you feel that I ought to know, but maybe I don't understand from the standpoint of a student, when we get home, I want you to call my attention to it. Because," I said, "if I'm doing something that I should not be doing something that I should not be doing, I

want to correct it." I said, "So this will give me an opportunity." I said, "No other children are going to come out and criticize you to your face." And I said, "On the other hand, I said, "we're going to help each other, since we're going to make the best of this." And you did. You were very helpful.

R. Really. Did I do that?

M. Yes you did. Ahuh. It was quite a while, and then one day you came home and you reminded me. You said, "Mother, you remember that you said that you want me to tell you something if you...that you were doing, that you would like to have a suggestion as to what not to do or what to do?" And I said, "Yes." You said, ah, "You ready for a criticism?" I said, "I'm ready." And you said, "Well, you give too many directions at one time." You said, "First you say do this, then do this and be sure you do this; and be sure you do this and that. And that's just too many." You said, "Just take one or two at a time." And that, that was true. Lots of times as an adult we don't realize that ah, too many steps in directions is just more than children can understand, unless you write them on the board, and follow them. I was giving them orally, which was a mistake. And I really learned from that, because to this day I am careful with the students. And I'll say, "First do this, and don't worry about the next step. I'll tell you as we go along." Maybe now it's too

exaggerated, but at least I don't give a five or six or seven steps of instructions to do. That was a good... It was really a good, a thing for me to understand, because as you grow up you learn to be able to take more instructions at one time. And then you forget that a child can't do this. You get lost. And particularly, Junior High aged children could get lost. And they hear the first one and that's all. They're not ready for that second one yet. So that was good. But ah, you were pretty active from the very beginning, in Junior High and High School. And whatever you got involved in, you didn't hesitate to involve your Mother and Dad. And especially your Mother at the last minute: "I need cookies for this," or "I need a chaperon for this." And you volunteered, of course this one...even in grade school we told you that feel free that if we were needed that we would be right there to help you. And you took advantage of it.

R. What ah...We're near the end of the discussion. We'll just close it off. What was it like after I left for college and took off?

M. Very lonesome, very lonesome. I think it's a...the house was almost like a funeral really. And we had talked about it. We knew that we would be lonesome but ah it was ah, I think Dad and I both went around with the longest faces. And we began to turn more into each other. We took more time to talk; we always took time

to talk. But instead of 15-20 minutes around the table, after you were gone we'd be here sometimes two hours after an evening meal talking to each other.... Ah it was ah, I had the desire, and even though I didn't even have time to sit down and write you a letter every day. And this is of course where Dad in his wisdom said, "Be sure you call home." And that helped a whole lot, just to hear your voice. Whatever. It wasn't that we didn't trust you, but ah...our concerns. It was just missing you, not having you around us. It's quite a different thing to accept. It's a, it's a point in your life when you know there are going to be changes. And you talk about 'em, and you read about what other people experience, but when you experience it yourself, it's a little bit different. And I began to understand why my mother and dad in particular, ah some of the feelings they must have had. And of course Dad understood all along. But we understood why it was so important to our families to go see them as often as we could. And we did that.

R. OK. Anything else? How has it felt to have me interview you like this?

M. I've never been interviewed before, and certainly by anyone, much less my own son. Not too bad. I just don't like the sound of my voice on tape, so I don't

want to hear that, when you play it back. I don't like my voice on....

R. OK, you don't have to listen to it (laughing).

Anything else you want to say?

M. What do I want to say? Yes, I'll say something.

Always give me an opportunity and I take advantage of it. No, the thing that...it just seems that once you're home, the house just fills up completely. Ahm, even though you might be upstairs, just knowing that you're here. It just means so much to us. And then when you're gone the house just gets so empty again. And ah, so we really enjoy having you home. And every time you leave, we always regret: "Well, we should have spent more time with him. We should have done this, and we should have done that." You know, we always have the "should haves." But we realize that you need this time, some of the time to yourself. And so just having you home, and even if you're shut up in your room sleeping or reading, or whatever you want to do, or climbing the mountain (laughing) it's just great having you here, for us. It really means a lot to us. The older we get, you always will mean a lot to us. But we're looking for a time.... We realize that there are changes in life; that we have to accept them. And that we will accept them when those changes occur. Ah but our biggest concern for you is to make sure that

you got a good start in life, that you were trained the best way we knew how to train you, so that when you became independent and on your own, that you would be able to take care of yourself--whether we were alive or not. In fact, many years ago we had made up our minds that we would write down the name, in our families we decided of all our brothers and sisters....Do you know who we decided if something happened to Dad and to me both that we would like to take care of you? Guess which member of our family....

R. Aunt Jay?

M. No. No not really....

R. Oh it would probably be a husband and wife, right?

M. Yes.

R. Gee, I really don't know...Nick and Ruth?

M. Nick and Ruth. We felt that they would...we, we talked it out...and this is something I think that all parents should keep in mind, that if something happens to both mother and father, that with an agreement of course. And of course we did ask them. We did it in a serious way. We said, "Should--we don't expect anything to happen--but if ever something should happen to us, would you be willing...?" Course they were so... they were just tickled to death. They were so fond of you. But we were thinking in terms of their education, their background, the ages of their children, and that's ah all those factors.

- R. Hm, I didn't know that; that's interesting.
- M. Well, it's not that we thought less of the others, but we were considering age. We were considering members of the family, and the responsibilities that the people had. In other words there were many factors involved. So we, in other words, were thinking of you in terms that until you were ready and on your own that provision would be made for you.
- R. Well, all right. I'm glad that.... (end of tape)

Interview of My Father, Raymond E. Kiser

- R. Well, let's start with that first question, what was life like for you when you met Mom? I guess it was right after you got back right from the service.
- F. Actually as far as I was concerned it was a case of getting your feet back down, after coming back out of the service, and it was a question of whether I was going on to college as I had planned before going into the service. And of course ah, I had worked for Kroger before. And ah, I had no intention of going back with them. But then they talked me into giving them a hand for a couple of weeks and gradually roped me back into a job. So ah, I was doing well financially as far as that's concerned, but ah....
- R. What was it like to come back after being overseas all that time? Like, was there a period of adjustment?

- F. It wasn't a problem of adjustment for me. I had been away from home many other times, which had been shorter periods of time, but no I didn't have any problem at all getting back in the groove. Ah my only problem was the ah question of going to college. I had wanted to get a college education, and ah of course ah, once I got back on the job, why ah that began to be put off. And ah, Mom and I you know, we dated about 3 years. When we first started dating I had no intentions at all of ever letting it go anywhere.
- R. You hadn't expected that to be a serious relationship? When you first started?
- F. No...well it had been my, my practice never to get ah closely related with a girl, but usually date one for maybe 3 or 4 months and when they began to show signs of becoming interested, why I would drop 'em right quick, so I didn't get involved (laughing).
- R. Well, what was different this time that you decided that you would get married?
- F. Oh, well just the relationship, the interest grew and ah.... One time about the usual time that I would discontinue the relationship with a girl, ah I was, I had made up my mind well it's time to separate. And some little something, a little conversation we had.... I guess created just a different feeling, and just gradually it grew of course.

- R. How did you decide, or did you make the decision as such, that she was the one you were going to marry?
- F. It was just a gradual development. It wasn't ah...I think we both, more or less, it grew on us where we just took it for granted. I don't think that actually I ever asked her to marry me (laughing). I said, "Here's the ring. Let's see how it fits." (laughing) Something like that you know.
- R. What ah...how did that change your life? When you got married?
- F. Oh great! In other words I...it was something I noticed very much, because I felt that before I got married that I was enjoying life, that life meant something to me. And ah, then after I got married I just realized that I hadn't really been living you know. And ah, that married life was just everything to me. And ah, and of course when you came along I had thought that I had been enjoying life when Mom and I were together, but then it just made altogether a different life, just completely different. In other words there was so much more purpose in life, then I guess. And of course the relationship that the three of us had together was just definitely great, you know.
- R. Did you find that your sense of responsibility shifted or anything like that?
- F. No...well, you know I was the head of the house at home. I kept them up even, like you heard me say that

I bought Paul his first suit, before I even bought myself one. And it was one of these Richmond Brothers \$22.50 suits, but still like buying a good suit today, maybe a \$100 suit or something today, maybe more. But ah, I felt completely responsible for Mom (his mother) and the family. And, of course, that's something that I gradually shifted to the other boys, and gradually pulled out of it, where it was....

R. Was that something that made it...made it difficult as far as where you took your time getting married is concerned?

F. I think so yes. In other words for a time ah I think the reason that I wouldn't let myself get ah too close with a girl where that I wouldn't ah feel that ah I was in a spot where I wanted to get married and couldn't. I just wouldn't let that relationship develop. And ah because I knew that I couldn't leave the family at that time. And of course, by the time that ah we got married, pretty well all the boys and girls were...pretty well....

R. Vic and Ralph were what, about 13 or 14 then?

F. Ah I guess they were in the service.

R. Oh yeah, by the time that you got married, yeah.

F. Right.

R. Ah...how was it...yeah, here's the question I was thinking about: Since, since you had had responsibility for the family, for your brothers and

sisters so much, how was it different for you from having that kind of responsibility to ah to having your own family?

F. Ah, it was just natural...it was no different. I just naturally had already lived with it all my life. So it wasn't something I had to learn.

R. Do you think Mom had to adjust any or was it as easy for her?

F. Well by the time we got married I don't think there were...well, there was some adjustment sure. Ah I think that she had a lot more adjusting to do than I did. Of course when we met she was younger. See she was ten years younger than I am. And like she said or will probably tell you, that I more or less raised her up, and changed her way of thinking, altogether. And ah, to begin with, now when we first got married, we had little spats--ah not when we first got married, but when we had first met, when we were dating. But we'd have ah not fights, but little differences. And she was an only, I mean the youngest child; and they had spoiled her good as far as that's concerned. And ah, gradually I mean that was probably the first few months. And after that ah, that usual time that I would leave one before I would let them fall in love with me or something like that or I'd fall in love with them--and we had learned how each other had thought

about different things. And so since that time, why we have just been naturals as far as that's concerned.

R. Did you...ah how did you resolve your differences?

F. Discussion.

R. You'd just talk them out....

F. Right.

R. And making decisions, were decisions always two-way decisions and that sort of thing?

F. Right. And ah, before we were married we had discussed every possible angle, you could ever expect to face in life. And we had our understandings of exactly how we would handle situations as far as raising children. In other words you grew up exactly the way we planned before we got married.

R. Like for example....

F. Well, in other words, we had our goals and our standards to live by. And we had a very definite understanding that in disciplining a child the other would definitely never disagree in the presence of that child. If we would disagree, we would discuss it to ourselves, but not in front of the child. We never showed that we disagreed with the one that was disciplining the child, because ah that's something that definitely I promoted because I saw that problem in my own mother and dad. Because they would...Mom was the tender hearted one. She couldn't stand to see a child disciplined. But Pop was a strict

disciplinarian. He loved his children, but then he was firm, and he would spank you--might slap you or something like that. But ah, Mom would show her disagreement right quick. You've seen her do it with the ah...probably...well, anytime anyone got after the children. It was easy to see it hurt her feelings. And she just had difficulty doing it. So that's where I could see there could be a real danger in a family. That it definitely could affect...

- R. How did that affect you? How did you survive if you saw that as a problem?
- F. Ah...I think that ah, you know I analyze things. I think deeply on situations. I may not say much, but ah I will watch; I will listen. And I think. And I think that ah, that ah before that I got along too far that I understood, and I knew that whether they were differing, that if Mom fussed at him because he was disciplining a child, that actually she was wrong. But then at the same time we had the tendency to feel that ah, Pop was being unfair, you know. That's the difference. The one that's disciplining as far as the child is concerned, they're going to feel that that parent is unfair, cause the other is agreeing with him that he's wrong you see. So ah...but ah at a very early age I think that I understood.
- R. You figured out that they shouldn't disagree with each other like that.

F. Right. I could see the problem. And as I got a little older and thought deeply, I could see where definitely it could not only be a problem, but maybe cause possible problems in the relationship of husband and wife--but very definitely the child.

R. Do you think that maybe some of the other kids in the family would play them off against each other more than you did, for example?

F. Ah, that I don't know whether they did or not.

R. Like if someone wanted help they'd run to Mom?

F. I don't believe ah...I don't ever recall any of the children running to Mom ah if Pop disciplined them. He wouldn't permit that. He was....

R. So he was boss.

F. Very definitely...he had very high standards.

R. But you decided that you wanted the system to work a little differently for you.

F. Oh...very definitely.... And ah, I never--spanking was always a last resort with me. In other words you can hear Frances or any of them talk, and they'll say, "Raymond never did spank us. He would take us aside and talk with us. And he wouldn't whip us like Paul and Ocie and some of 'em did." And ah, I never spanked you a time in my life. But I think any time I told you something you knew I meant it. It was no problem. Big thing is that you love 'em. You show the love, and that you're firm. You don't ever threaten them.

That's one of the worst things that parents... most, practically every parent living tried to discipline their children by threat. And then when they don't follow through on it...they've broken a promise.

R. How did you avoid threatening?

F. I just didn't do it. I just told you what I wanted and that was it. I never told you that if you do this I'll spank you or anything of the sort. I never told you that. Do you ever recall that I ever threatened you?

R. No, I don't recall it.

F. No, I didn't. And talk about the little incident that Mom will tell you about the "Boo!" You'd ah been starting to get a little bit rowdy with her--kindly talking back or something of that sort. And she mentioned it to me. Then when she mentioned it to me twice, why the second time, "Well, I better have a talk with Ray Doug." (starts to laugh) That's when I stood you up... (laughing. Although it isn't explained here, in that incident after he gave me a long serious lecture, I got up close in his face looking him straight in the eye and said, "Boo!")

R. Yeah, I remember that....

F. But ah...I think the thing that has ruled our life has been love and respect between us. And ah, that is the essential thing in life I think.

R. We were talking a little about how things changed after you got married; let's talk a little about how things

changed for you after I came along. What was just different for you in terms of how you assumed responsibility for me and so forth?

F. Well, ah, like I said, I don't ah other than feeling that more completeness of life in other words that things were just absolutely different. In other words the fact that you were a part of me, and ah. As far as feeling responsibility it's hard to explain from... in other words the difference in the responsibility was the difference in the love that you have for your own and that you have for your brothers and sisters. As far as taking care of the money and the financial end of it, ah the present day thing that was little different. But the thought for the future that was the difference in your own. That's where that we've looked forward to security and education and one thing and the other.

R. From your point of view, what was I like as a child?

F. Great...(he starts crying)

R. It's OK. (He laughs at himself a bit.) I feel it too. (after a pause) Did I do OK? (we laugh) Get along all right? Did you worry about me or....

F. Ah, the only thing that I ever worried about you was your problem with your health. Ah and from a standpoint of worrying, naturally you were concerned about every little possible thing, but it wasn't

something that I'd say you'd worry about. Naturally why the health.... (He begins crying again.)

R. That's OK.

F. But ah, you were always so perfect in responding to every effort that we made. In other words we didn't have the problem of training you. We told you what we wanted and why that we wanted it this way, and you followed through real...real well. And ah....

R. Mom was telling the story about my disciplining myself a couple of times.

F. Going in the corner? (laughing)

R. Even before you asked me to do it....

F. Yeah, that's ah, that was...well that is an example of how ready, of how cooperative you were.

R. Did you ever worry that I might be too cooperative sometimes? Did you ever wonder that I ought to maybe fight back a little bit, or...?

F. No. Ah, there was enough spirit in you. That was not a, not a problem. And that's something that we watched real careful that we didn't overdiscipline you. And ah, that's ah...Now Mom occasionally would do a little fussing. But that's something that I had to watch with her, because ah....

R. Fussing at me you mean?

F. Yeah. You probably remember that she would fuss at you about different little things. And ah, that's the thing that I told her, and had to guard on her that she

didn't overfuss at you, cause I felt that was something as bad as threatening a child and not following through. Because fussing at them, too much of it gets old to a child too. So ah, I kept telling her that you tell him exactly what you want and don't dwell on it. Tell him what is necessary and leave it at that. And ah...But that is something that our relationship, our understanding between the two of us was excellent. I don't think that you could ever find two people that could agree and handle situations between us any better than we have. And ah...(pause) the one little incident that I felt that you--you asked if I thought that you were overly cooperative--was the ah. As you were very small--every time that ah I'd be on a trip and come back in and anything why I'd usually bring you something. And so you got in the habit as practically all children do that they expect something. And so it was just a matter of training. I was--I taught you, you know, the value of a dollar so you would understand how money would work. And ah, but ah, I know that every time....

R. I doubt if I ever learned that....

F. Well, I think you did. And ah, but every time that we were on the road or on a vacation trip or anything, we'd stop for a break. You'd head for a toy department or...and that would just tickle you pink. And naturally why we were always happy to buy you

something. But ah, I was gradually developing this value of money value...as we went along. So one day we stopped ah in a department store somewhere. Mom wanted to buy something. And ah, you headed for the toy department as usual. And of course I went along with you, cause ah, if you found something you wanted, why I was ready to buy it for you. But ah...you looked that department over and looked at several different toys, several back and forth, searching, checked each one of them. And you finally settled down on a, I believe it was some kind of little car that you kept in your hand...and seesawed back and forth several minutes. And I finally asked, "Son, do you ah want this toy?" Cause I was ready to buy it for you. I think it was maybe \$3-\$5, a pretty fair toy. And ah you said, "No, Dad." You said, "I don't believe I would get that much use out of this toy." And I ah, "Well, if you want it I'm ready to buy it for you." "No, I don't believe I'd get that much use out of it." Well that just killed me you know. My goodness. Have I overemphasized the importance of money to a child this young, and where it's going to make him grow up too fast, you know? And that really hurt.

R. Hmm. I didn't know that. I didn't remember it.

F. And ah, I knew that I had been very very careful as far as that's concerned. And I never ever intended that you shouldn't have what you wanted and enjoy life. It

was a matter of training, so that you could appreciate the value of things. But it did make an awf...from then on, ah, you thought. So you had grown up to a great extent even at that young age.

R. How old was I then, about? Do you know--roughly? (He sighs.) Was I in school, or was that before school?

F. I don't remember...somewhere right around the year before school or right at that time anyway.

R. Do you remember anything about ah...how I got along with other children and other people?

F. Well ah to begin with you ah didn't want to share your toys with other children; we talked with you about that--that it was important that ah you be ready to let other children enjoy your toys because sometime they may have one that you might want to play with too. And you would feel hurt if they had something that you wanted to play with and they wouldn't let you. And they felt the same way. So ah you understood that, and you learned it fast. And ah as far as ah people was concerned, ah you were a little bit--push 'em aside more or less attitude--if ah say older people say at church... as a young child, the way that they'll give it attention. And I remember Albert Barley--I don't know if you remember him or not--the attorney? Ah he ah would want to speak with you. And by that time I guess Mom was up singing in the choir. But ah after service he would ah come around to you and want to

shake hands or something. And you would kindly...didn't like that. So I talked with you about it. It's very important to be courteous and friendly to everyone. You wanted to, you didn't wait till they spoke to you. You speak with them first if necessary, but especially if an older person or a child spoke to you that you wanted to be very friendly with them. And ah, so from then on why you took a real pleasure in putting that hand out to shake hands with Albert or.... And of course ah...you had already learned pretty well to come along with children more. But ah, that was the, the real pleasure of teaching you as we went along, was that you did respond very very well. It was such satisfaction to...that it would, you would take these things so readily and.... We didn't have to remind you too much about anything. So that was ah...that's the point though that I got after Mom about never fuss, because they tend to expect it, you know, if you do it. If you don't ah, if you tell 'em something and don't fuss, say, "Well, she's not serious," you see. And so that's ah the, kindly the understanding we had, that ah, but.... I do feel that the understanding that we had between us even before we got married generally made it so much easier. And we did obviously think very seriously about life, you know, because getting married and raising a family....

- R. If questions like that would come up you'd just have conferences about it? Would one of you initiate more about that or did you have a regular way of getting together and talking about it?
- F. Well normally, you mean as far as the child is concerned?
- R. Well, that for instance or any other decisions you had to make.
- F. Well, naturally we always discussed ah different things.
- R. When would you talk...like over dinner or...?
- F. Yes, but if it was something that ah was urgent, why naturally we'd bring it up any time or place. But as far as the disciplining of the child is concerned, ah that was something very definitely--I don't. Do you ever recall us differing about disciplining you at any time?
- R. No.
- F. To begin with why we didn't have that problem.
- R. I recall...I recall very, I have trouble remembering any kinds of arguments that you ever had. And if you ever had to have a difference, that you would usually try not to do it in my presence.
- F. Right, well we haven't...arguing is something that we haven't had a problem with. Sure we'll have a little temper....

- R. I, I, I can remember times, you know, a time or two you'd be upset with each other about something or Mom would cry about something.
- F. Mom used to be easy to cry.
- R. And uh...
- F. Things that you'd never--it used to bother me, because something that you'd have no intention you know for her taking it like she did. But I think--I don't think it was the, what was done or said. I think that probably it was a little situation but nothing like disagreements that meant anything. And as a rule we were smart enough--and this is something we discussed ahead of time--in other words if one definitely gets disturbed, then the other one has to be solid enough to handle it, not join them in their feelings and make it grow, you see, but to back off if necessary or agree, whatever's necessary--and come back to it later if necessary.
- R. Hm ah, we already mentioned the problem about my health... ah, what kind of crises were there, or were there any crises that we had to get through in those early years?
- F. You mean at the time you were in the hospital or before?
- R. Before when I was a child, say like the first 10 years of your marriage.
- F. On the health problem?

- R. Uhum.
- F. Well to begin with you had a very difficult time adjusting to a formula. It just wouldn't sit...orange juice or anything, it would bounce back on you real quick, and ah....
- R. What I'd say, were there any kinds of, in addition to my own health problem, were there any other kinds of crises that we had to get through?
- F. Well you know I had a health problem.
- R. Yeah.
- F. Back then too you see. And ah, very serious for a time. And ah, that I think again is where family and the love and the sense that ah, that I felt very definitely I must overcome it, because I just let my family go at that age. So ah, I think that that did (He begins laughing as he is also on the verge of crying.)
- R. Pulled you through?
- F. Definitely, I think so.
- R. Ah (pause) well let's move on--how about when I was a teenager. Like in Junior and Senior High--anything you remember about me then? About what I was like?
- F. Pretty much the ah, as before except that was the time when your surgery ah had to be done you know and there was a period of time from there that was so different. But you, of course, were an excellent student. We

really enjoyed your achievements and ah were very proud of you.

R. Did you see me, did you see me change...like, did you notice any differences in my personality as I got older? Did I change in any way? As I got to be a teenager?

F. Not, I don't think, not really. In other words, just the growing up process...pride and one thing and the other, but those are things that you showed as you went along. And I think it just became more so. Anything particular you ah...?

R. Well, no, I was just wondering. I kind of had some subtle feelings about how--how I changed, nothing radical. But I was wondering if you, if you noticed anything about how it was different for me as a teenager. Maybe I was a little bit different character from what I had been as a child, but if it was pretty consistent that's true too.

F. Yeah, I don't know...there was no radical change; no it was just pretty much the same person gradually growing and maturing, and developing. So it ah...and that hasn't changed today. You're still the same person that you were back very young.

R. So you still see a lot of the same person that you saw in me when I was 5 and 6 years old?

F. Definitely.

- R. That I already had a lot of those characteristics showing that early....
- F. Sure...very definitely. (pause) Mom didn't think so?
- R. (we're laughing) No...I didn't ask her quite that same question.
- F. Definitely though, you were very much the same person. It was just a steady growth.
- R. Uhm. I had an impression--I'll share this with you and see if you can check this out--I had an impression of me of ah...in terms of what you were talking about of being socially oriented and caring for people--that that was something I had to grow into...that I was kind of happy about having some time to myself and being alone... that as I got older I learned more about people and ah ...that maybe for a while there, like when I was in Junior High, I was maybe a little bit shyer, or at least with my peers....
- F. Well, I'm sure of that but the interest and the will were there and the desire, and you were definitely going in the right direction....
- R. And I can remember, from my memory differences that for example when I was about 10 and 11 years old, I was known as the "know it all" to my friends in school....
- F. Well that was ah, there were several of you that were pretty much in that....
- R. That ah, it took me a while to cultivate some good friendships...that it was like only when I was in high

school that I really felt good about my peer relationships and I had eventually become more popular....

F. I'd say that's true....I probably was responsible for some of that feeling because you were ah very concerned about the fact that you were not able to be as strong as other boys your age athletically and one thing and the other. So that was bothering you and ah to keep you on an even balance there I had told you that, "Sure, you may not be able or as athletically inclined as some of the other boys." Take ah, what's his name? Your buddy?

R. Oh, Bill Mentz?

F. Bill Mentz. He was very good you know.... "...that you may not be as athletically inclined as some of your friends, but you had better intellectual ability than either one of 'em. And that they would be real proud to do as well as you in studies, as ah you could do." So that kind of balanced out so that you didn't feel inferior, you know. And so making that point, I probably caused ah maybe a little of that. And since they were naturally probably boasting about how good they were in athletics, why you probably naturally showed them how good you were in your studies, you see.

R. Yeah, well I...I think I did compensate in some ways that way....

F. I think it made a difference in your interest in excelling in your studies, because you knew that you were, before your surgery, you were handicapped to some extent and that way, because you couldn't play football.

R. Did you see any changes in me--other than obvious physical changes--before and after the surgery?

F. In you mean personality?

R. Uhum, any changes at all....

F. Well, definitely you could see that ah, well the load gradually seemed to lift from you, because I know that you were concerned about the surgery. You knew from a long time back that you were going to have to have it, because ah when we first went to Charlottesville and to Johns Hopkins for the check-up years before when we first discovered the problem, why they explained it to you then. And ah, that's one thing that I requested of them to do. I thought that you would be better to understand it from the beginning so you would cope with it and grow along with it, and ah but then, no, things kind of blossomed out; you spread out. I could see the definite change in you--become normal. You could see, feel the--ah...Well, I guess the ah... probably a greater confidence generally. And of course you were able to ah go into sports and do things more normally than you were ever able to you see. So it made you a much more balanced person, because before you were

kindly naturally more one-sided in it, I guess, ah to some extent. And I think that you ah definitely ah had that realization that you had come through a difficult ordeal there. You never failed to appreciate that I think. I think definitely it was a growing thing for you. And maybe that that was when the roots were really put down for you to go into the ministry.

R. Uhuh, this is a question I hadn't ah, I didn't get around to asking Mom, but ah how did you feel the first time I started talking about going into the ministry? Thinking about that as my direction?

F. Ah, very happy as far as that's concerned. You know we never ever urged you to go into the ministry. We raised you up from the cradle in the church, and tried to teach you, a what was it all about to see Christ and love him and live for him. But as far as ever urging you to go into the ministry.... In fact we didn't think of that at all through the years. But ah naturally when you first became interested why ah we were pleased. But we knew you could take it with a certain amount of grain of salt, you know. Because, like you've seen, so many boys have been interested in the ministry at a certain time, and then it passes. And, but we knew that you were solid as far as that was concerned, but whether or not that you would really go into the ministry why that was no assurance. So we continued our ah training and attitude and everything

as if you had never mentioned it as far as that's concerned, I guess. Cause we wanted you to ah make the decision and we were ready to help you any time we could, but we.... I don't think that you ever heard us urge you to go into the ministry or any other field as far as that's concerned. Now before you went to college while you were in high school, ah I know that I made a point of discussing different fields with you so that you would give it thought. And I suggested to you that you think through on these different things, and make sure that the decision you made that you knew why you wanted to do it. And ah, I think that was important and ah I know that you definitely weighed different careers, directions as far as that's concerned. And ah, so I have an idea that some people feel we did start to raise you up to the ministry to begin with. But (that) was not it; we raised you up for God. We were feeling that you were His, but in our care.

R. Well I...well I like that. I remember early on your being concerned, you know, that you liked math, and that was your dad's specialty, and you wanted to be sure....

F. I was...naturally at one time I had hoped that probably you would go into engineering or medicine or.... And naturally those are big fields and big money. And I knew that you had the ability and everything. But

again I never did urge you to do that. I did discuss the different thoughts on it, so that I would encourage you to think deeply on it, and hopefully make the right decision. So ah...no I think the good Lord-- personally, I have felt that we have all been in his hands. And ah, everything we've gone through, why I think He's been very close to us.

R. I think so. Let's get into another difficult part....

What was it like after I left for college?

F. Great big empty spot. Great big empty spot.

R. Yeah. How did you adjust to that?

F. Ah, the only way I guess we adjusted to it was we knew we couldn't do anything about it. We knew and discussed...and one of these things that I've often told Mom is that once Ray Doug is in college, that's the last of real home life as we have known it. It's different from now on, and he'll never be back home likely--be with us any period of time. And I think that ah that we made our decision immediately from realizing these things as something you have to live with, but get the most you can out of it otherwise. We've tried to, to stay in contact as much as possible, and have you home as much as possible or we with you or something. But ah, the fact that we mean as much as we do to each other, naturally it's one of those things that made it easier to adjust to, I'm sure.

- R. Was there anything that was good that was new? Ah, maybe your having to spend more time with each other or something I don't know.
- F. Ah.... Oh I'm sure of that.
- R. Any benefits at all of getting rid of me? (laughing)
- F. I don't know of any benefits, no. I think that...we suffered together.
- R. Yeah. Ahm. Let's see there was one more question. (pause) Oh yeah. Ah (laughing) This is a more current question. Have you been concerned about my being single so long?
- F. Not really. No ah, that's pretty much me you know. Ah the same as I had responsibility for the family and did want to go to college before I got married. But the biggest thing was the responsibility for the family that kept me single. Well the same thing. You had your education and..that you, I know, wanted to get behind you. And ah I felt that you didn't want to take on responsibility or have someone to maybe live the lean life along with you that you knew you'd have to face. No it's been as far as I'm concerned, it's normal for a Kiser. (we laugh)
- R. That it is, isn't it? Look at you, and Paul and Ralph. Well you, you were married as a spring chicken compared to Ralph and Paul. Ralph was 39 I think, and Paul was 40 wasn't he.

- F. Paul was 40, yeah. That's not to be recommended (I laugh and he joins me).
- R. Well, all right. How has this interview been for you? We're about done.
- F. Great. All right. I always like to talk about the family. (laughs)
- R. You decided you were more helpful than you thought you'd be?
- F. Well, I hope so. I hope so. (He then asked me to tell him again what kind of course this assignment was for, and I launched into a long explanation. As a part of his response, he said the following:) I had deep convictions on what a family should be like before I ever knew Mom. And of course, she'll--I don't know if she told you--but will probably tell you that I had to pretty much educate her and bring her up in that understanding one thing and another because I was 10 years older you know....
- R. Yeah, the impression I got from both of you is that ah definitely you had a lot of experience, and yeah you had your, you really, you had a sense of direction. You knew what you wanted. And ah...and that was less so for her. She was younger and she hadn't thought about a lot of those things. And she sort of came along on it. And she was used to having some things taken care of, and that it was a gradual process for her to take certain kinds of responsibilities.

F. That's one thing now, especially when my health was giving me a problem there, why that's where that I really put her into teaching her business where that she could take care of our own private business in case something did happen to me. And it, but it was more or less just wisdom of knowing that our life would be better balanced and that we would have a better understanding if she knew the full scope of family business as I did. So that naturally we could work together much, much better. So ah, that was a....

R. So it's definitely like a 50/50 principle as far as sharing was concerned, but also maybe the factor of your health....

F. That sort of urged it on.

R. Yeah...made it more necessary.

F. Brought it home a little closer as to that.... What spot would she be in supposed if I went immediately you see.

R. Because as I was thinking you know your being 10 years older than her.... It's probably kind of natural since she was the baby in her family for her to expect a certain kind of leadership from you. ah.... And at that point at that crisis it became more obvious that it was necessary for her to be able to pick up and help.

F. Right, and she didn't want to do it. She just didn't. She hated business. She'll still tell you that she doesn't want to have anything to do with business, but

she is good at it. She does well.... Now ah, I've been real frank with you, now ah what have you derived from it? Is there understanding that you didn't realize existed? Maybe down through the line? How well does the...?

R. Oh it fits pretty well. There...there were some things that I didn't remember that you told me about me that ah...I don't have that much of a memory about how I was as a child. I remember in general that I was not a problem child...I tried to cooperate as far as that's concerned.

F. I think our greatest thing...one of our greatest joys in other words, we talked about bringing you up in the ministry, which we didn't bring you up intentionally as far as that's concerned. But then we had our Bible study and our prayer every night. And of course, I don't know if you remember or not but I always held you in my arms and kneeled down...you've got a picture of....

R. Of our praying, yeah.

F. And ah so we did it that way where you grew up where that little head began to push my chin (we laugh). And then we did it where that you....

R, Side by side.

F. Right, well I was still holding you but your head came up past mine. But ah that was ah I think...and the

little thing of the bringing the three of us together and kiss at the same time....

R. The Three-Way Kiss....

F. Well what else could demonstrate to a child that there's real love between us? And I think that it meant more than maybe you realized at the time. But it was a natural thing. You see.

R. Well yeah. I think part of the value of this for me is just for us to sit down and talk about it. I think we all know it. We've experienced it, but it's...it's helpful to have an occasion like this just to bring it up in conversation.

F. Sure....

Commentary

As one examines the structure and dynamics of my parents' families of origin, one discovers parallels as well as a complementary relationship which probably contributed to the bond between them--enabling them to transcend some major differences in cultural background. In both families the oldest children took on family support responsibilities in their middle and late teens. In both families the older children generally sacrificed for the benefit of the rest of the family during the Depression years.

My father, who was 10 years older than my mother, had already had much experience with family support responsibilities, and with seeing the world via the army; he

seemed to know what he wanted in life. As the youngest of her family, my mother was less confident of her ability to take on basic adult responsibilities, and found natural support and guidance through my father. While my father was ahead of my mother in maturity and real world practical sense, he found balancing benefits in her contribution of a college education and the social prestige of her profession.

My own speculation about them from what they told me is that there was a kind of power imbalance at the beginning of the relationship which gradually--though perhaps not totally--leveled out. My father assumed responsibilities for my mother in the same way he had learned to take care of his own younger brothers and sisters. He was not particularly satisfied with this dynamic in the long run, however, and he prodded her in various ways to "catch up" with him in handling family responsibilities and in the advancement of her education and money-making power.

The importance of this equalizing dynamic came home for them when my father faced serious illness only a few years into their marriage. He, in particular, was overwhelmed with a concern that provision be made for my mother and me to continue and to survive economically in case he should die or become disabled. This fulfilled directly a script from his own family of origin that you always have to have a back-up person or system ready in case the main breadwinner is lost. From that point my father especially stressed the importance of my mother's training in handling family

financial business and her educational advancement to at least the completion of a master's degree.

They both saw her as accepting certain new roles reluctantly, but gradually taking them on with strength and competence to the point that my father became fairly dependent on her to handle many basic chores of family life and organization.

They both saw themselves working from early stages--well before their marriage--to make their major decisions 50/50 decisions. For example, their decision about religion and church membership involved an effort by each to be fair and tolerant of the other. While they agreed on a need for family unity and consistency in church participation, neither tried to push or persuade the other toward a hasty or grudging commitment. They both saw themselves to be communicating about and sharing most of their decisions.

I also noticed a pattern on their part simply to put off making decisions if they could not be easily or enjoyably made. From time to time, they decided something by deciding not to decide. For example, several years ago my mother had a car accident on a weekend business trip out of town. The car, a ten-year-old Dodge Dart, sustained significant damage to the body and was towed to a local lot where a small daily fee was charged to keep the car. My parents had trouble deciding whether it was really worth it to them to pay the high cost of having the car towed back to our home. Did they want to pay for the repair? Maybe some

local vocational school students could fix it up for free? A nephew volunteered to tow the car in with his pick-up, but he never did. My folks never pursued it with him. They just let the car sit without ever coming to a firm conclusion about what to do or how to do it. Finally they realized that the car had run up too much of a bill, sitting on the lot, to make it worth their trouble to do something, so they simply forfeited the car.

In our family of three there were three neatly divided subsystems or dyads: (1) Husband-Wife, Mother-Father; (2) Father-Son; (3) Mother-Son. The marital dyad was probably the strongest entity, relating often as a single entity toward me as their child (possibly, therefore, a fourth dyad). They likely experienced a greater cohesion in their relationship as a result of their decision to form a parental alliance in relation to me. There was definitely a greater exchange of intimacy between my parents than between either of my parents and me. I think, for example, that there was a bit of reluctance on their part to be interviewed by me separately since this tended to challenge their alliance. They were both eager to know how much I found them to be in agreement in their statements and assessments.

The father-son dyad was a natural male identity dyad. I always liked my father, and enjoyed imitating him in various ways--particularly in teasing my mother. When my mother would ask what we wanted for dinner, my father would

toss the question back to her by saying, "Food." I soon learned to join with him in saying, "Food, please." With frustration she would shake her head and try again. In family games, I generally teamed up with my father to make sure that he won. I didn't like to see him lose.

My mother and I formed an alliance on the "underside" of authority when she was not aligned with my father. We learned almost intuitively how to get what we wanted from him without challenging him or hurting his pride. For example, my mother and I teamed up to persuade my father to have the two of them make the trip to San Antonio for Christmas one year. My father was not excited about the idea, and held back as long as he could. In fact, he held on to the prerogative to cancel the trip up to the last moment. When both my mother and I asked persistently for the same thing, Dad usually acquiesced. When the mother-son dyad was being empowered, Dad referred to us as "you people." For example, when he was ready to abdicate responsibility for a decision, he would say, "You people better hurry up and decide what you want to do."

This decision-passing game--by the way--was a fairly common one, which I used to try to thwart. Eventually, I became more inclined to let go of my need for control in hope that they would take charge of problems I thought they were avoiding. For example, I used to worry constantly with them about what kinds of plans they were making for retirement, and about getting them to lose weight and to

take care of their health. I finally decided to quit trying to get them to move according to my worries and wishes. I told myself that they were adult persons who had managed to take care of themselves thus far somehow, and that they would continue to take care of themselves in their own way. In other words, I stopped trying to be a parent to my parents. By letting go of that particular power struggle with them I think I also let go of some of the lingering vestiges of adolescent-parent conflict. I became no longer bent on reforming or curing a pair of parents who saw no great need to change. The paradoxical dynamic in this was that I saw them doing more growing and changing on their own in their last few years together. Both took on the challenges of retirement. Both worked hard at watching their weight and their health.

Our family seems to be near the middle of the enmeshment-detachment spectrum with perhaps some leaning toward the latter. My father was probably in some ways more attached to his family of origin than my mother was to hers, but both of them differentiated themselves rather successfully within and beyond their families. My father retained some emotional tapes which said that it is a betrayal to leave your family and go off on your own.

Both parents encouraged me on a track of independence and self-sufficiency; yet they took great delight in doing things for me and in offering financial support. From an early age I was persistent in resisting their help where I

did not want it. Rarely, even when I was in primary grades, would I let them help me in any way with my homework. I was determined to have my work be solely my own. In later years a learning issue for me was to become more competent in cooperative interpersonal situations.

While my parents encouraged me and supported me in my various decisions about career and geographical location, they experienced a good deal of grief about my departure from the family home. There was a strong emotional pull--an expression of that separation of grief--which emerged each time we were together.

For several years I successfully encouraged and persuaded them to come to see me for Christmas, rather than to have me go back to West Virginia to see them. When they did come to see me, I felt less of a sense of loss at their departure. Rather they enjoyed catching up with what I had gained by leaving home.

In the interviews neither of my parents were able to think of much benefit to them in my leaving the nest. My mother did note that after I left for college, my father and she ended up spending more time talking with each other--often for hours each evening. The dyad was reemphasized and strengthened. At other times I also heard my father say that they learned a lot from their travels visiting with me in different parts of the country from New England to California.

It was interesting to note one difference between my parents in how they saw me. My mother remembered me as a child who was very willful, always having a mind of my own. She could never get me to do something I didn't want to do. My father, on the other hand, remembered me as being very cooperative and quick to learn and adjust my behavior. When I asked if he thought I might have been too cooperative he said, "No, there was enough spirit in you."

I attribute this distinction in frame to the power dynamics of the family and to the individual styles of my parents. My mother had a tendency to be bossy and occasionally manipulative in the use of power; whereas, my father was rarely imposing and generally was more direct in using and sharing power. I have discovered that my resistance jumps up quickly when I feel that I am being controlled or manipulated. On the other hand I will practically bend over backward for people if they know how to ask me. As a child I probably deferred to my father's approach to discipline which involved sitting down and talking about the whys and the hows.

Both parents saw me as being intelligent and talented, while physically weak, and probably more fragile than I actually was.

The weakness frame was sanctified and excused by my heart condition. My surgery at age 14 became an important source of liberation from that particular frame. Most persons who know me now are a little surprised to learn of

this part of my history. In the interview with my father we talked about how I saw myself changing in adolescence--in moving out of the "know-it-all," weak guy frame toward a more balanced set of strengths and skills and toward more social acceptability. That was more my interpretation, something my father acknowledged and recognized only after I expressed it.

In the process of the interviews I discovered that there were several family rules which had been overt for my parents, but covert for me; e.g., shared only in their dyad. The main rule about discipline was that they would never disagree with each other about disciplining me in front of me. My father pushed for this rule--even in their pre-marriage conversations--because he had seen his parents disagree openly about discipline. He felt that the contradictory messages were not good for the children.

I appreciated their concern for consistency and the avoidance of double-bind messages, but this also led to a kind of collusion between them. There were other subjects which they chose to withhold, such as the discussion of sex. There was enough of a taboo on this between them and me that I have always been uncomfortable about introducing or discussing sexual topics with them. The effect of this collusion rule was to limit certain kinds of intimacy between my parents and me. I also tended to protect them from some of the things I learned outside the family. I have usually been happy to leave the family myths

unchallenged. For example, only in the process of the interview with my mother did I discover that there was more to the story of why I am an only child. I have always been satisfied with a simple explanation that it was a matter of the Rh factor problem. There could have been other children later on, but my parents were worried about the risks of birth defects or mental retardation. There could have been other problems as well relating to their lack of privacy in the bedroom.

Our family has always been very affectionate and warm, but it takes a good deal of effort for us to express those warm feelings to each other verbally. Times of crisis tend to bring those feelings out more for us. I remember being touched a few years ago after my father was recovering from phlebitis. He concluded a phone conversation with me, "I love you, Son." I remember being a bit shamed to realize that we did not say that to each other very often. One of the great benefits of this particular project was to help us break down a few more of the old Parent-Child communication barriers and to enable us to see each other more in an adult-to-adult frame. That result made the effort particularly worthwhile. (See again the concluding exchange in the interview with my father.)

Theological Reflection and Integration

Once again the theological model described in this dissertation focuses on the concept of analogy and the

linkage of a part to the whole, and linkage of the immediate and the preliminary to the ultimate. Family systems approaches in counseling have enabled us to discover strong links between patterns in a person's current problems or issues and patterns which have existed in that person's family of origin, perhaps over period of several generations.³ A family systems therapist quickly learns to recognize links between a person's current relationships and his or her primary relationships; between a person's current operational patterns and his or her family of origin operational patterns.

If, for example, an individual grows up in a highly structured and rigidly controlled family environment, he or she is likely to carry patterns of structure and rigidity unconsciously into his or her relationship with others in the world, whether behavior is expressed in affirmation of structure or rebellion against it.

Theologically our task is to go one step further in looking for analogical patterns and the linkage between the parade of unique patterns in the various family systems of our world and the ultimate truth or reality of God. Once again our approach begins with the assumption that such an analogical linkage may well exist between the preliminary

³Irene Goldenberg and Herbert Goldenberg, Family Therapy: An Overview (Monterey, Calif.: Brooks/Cole Publishing Co., 1980), 75-129. See this reference for a discussion of the development of family therapy and the systems approach in the United States.

realities and ultimate truth; between the immediate trivia of human experience and the cosmic concerns of theology. The purpose here is not to prove such a linkage, but to probe the possibilities of what such a linkage might look like, and to consider the ramifications of these possibilities for the theological enterprise.

In the above family case study, the possibilities for analogical association are endless. If this study were to be examined in the process of group supervision, once again, as in the previous chapter, we might begin the theological enterprise by inviting brainstorming about analogies, Biblical and theological images, and other symbols, points of opening for further exploration of links between the preliminary and the ultimate. I shall not take the space in this chapter to provide a list of suggestions, but shall move immediately to some selected primary structures in my own family of origin which provide the basis for considerable theological reflection as described above.

Parents and God

Perhaps the most basic theological analogy pertinent to almost any family system lies in the relationship between parent images and God images. Indeed Freud presumed that much of what passes for religion and conceptualization about God is actually a massive transference, that is, a

projection of parental images, especially father images, onto the concept of God.⁴

Indeed, even today, I can see many similarities between my understanding of the nature of God and the nature of my parents' personalities, especially that of my father. For example, I saw my father as a firm, though never harsh, family leader who believed strongly in discipline and will power. Beneath his strong exterior, however, he was a gentle, warmhearted, sentimental, loving father. He was a remarkable mixture of pride and humility, and there was no sacrifice that he wouldn't make for his family.

My own images of God intermingle easily with those of my father. Historically and experientially I see God as a god of law and grace, one who sets before us an extremely high calling and yet showers us in love and grace, one who forgives us and celebrates with us as did the father in the story of the Prodigal Son (Luke 15:11-32).

In the theological approach which I am proposing, one need not look for cause and effect relationships in such analogies. Sometimes, in fact, it is helpful to assume that cause and effect linkages are not important. For example, it isn't necessary here to debate about whether my own images of God are solely the effect of psychological projections from my unconsciously internalized images of my father. Nor is it necessary to ask theologically whether my father was

⁴B. Spilka, "God, Ideas and Images of" in the Dictionary of Pastoral Care and Counseling, eds. Rodney J. Hunter et al. (Nashville: Abingdon Press, 1990), 465.

created especially to reflect the image of God's love to me and others.

We begin simply by noting that an analogy exists between the two images, and that therefore issues in my relationship with my father may open the door into concerns about my relationship with God, that parallels may exist in the dynamics of the two relationships. Therefore, for example, whenever I work in therapy on my relationship with my father, I am probably touching a key link to many significant spiritual dynamics in my life.

For example, in the process of my personal therapy following the death of my father, I gained a greater awareness of a basic conflict dynamic in my relationship with him. On one side of the conflict I was very much enmeshed with my father and felt very strongly the tug of my loyalty to him. On the other side of the conflict was my need for personal differentiation and independent identity; that is, my need to pull away from the family enmeshing forces and be more of an adult individual on my own. This conflict was acted out as I settled in parts of the country far from my parents, while I nonetheless struggled with feelings of desire to be closer to my parents, to be more expressive of my love for them, to be more involved in a more adult-to-adult relationship with them, and to be able to take care of them as they grew older.

This conflict was passed on to me in some ways through my father in terms of the ways in which he experienced the

same dynamics in his own family and therefore advised me. For him family loyalty was a very high value, and in that perspective he made many personal sacrifices for both his family of origin and my family: delaying and eventually giving up on college, delaying marriage, and passing up opportunities for promotions and career advancements in more distant locations.

At times he wondered what life would have been like if he had not passed up so many opportunities for the sake of family, and in many conscious and unconscious ways I believe he wished to see in me the fulfillment of those kinds of career moves which he had not taken. Occasionally, for example, he warned me about letting marriage get in the way of career goals. When I did move away, however, he was at times disappointed, though accepting, that these moves took me far from home.

After his death I struggled with feelings that I had wanted to be closer to my father and even more expressive of my love for him. Yet the problem for me was that it was hard to be close to someone when I was also expending so much growing up energy in trying to get away.

This is probably a fairly common problem for children in their relationship with their parents, and may be a fairly common dynamic in human relationships with God. For me, my relationship with God and also with my calling in ministry have included many approach/avoidance conflicts which bear analogies to the conflict in my relationship with

my father. Again on the one side is a need to be individuated in a process of personal growth and the fear of losing self to the larger family ego mass. On the other side is the need for connection, closeness, reconciliation, and a fear of loneliness and alienation.

Another one of my father's family images which may have significant analogical relationship to some of my personal God images is the image or role of my father as the family hero. If there were losses to him in terms of his personal career development, there were usually compensatory gains in terms of his role and stature as one of the saviors or heroes of the family. When his father grew ill, he became the new provider and protector for the family and significant surrogate father for the younger children. His image of strength and responsibility and his ability to save the family from total economic disaster, especially during the Great Depression, lifted him to a very high status of respect throughout his family system. That stature carried over strongly into the life of his marriage and subsequent family life.

He was certainly a figure who lived on a very high pedestal in my mind, and still lives there in many ways. His marriage to a woman ten years younger than himself also reinforced that image of the older, wiser, stronger protector of the family. He was always regarded as a very powerful symbol of strength, provision, safety, and

stability for his family. At his funeral I referred to him as the rock or the foundation stone for the family, not unlike the "rock" image which Jesus ascribed to Simon Peter.

This image of my father as a strong hero certainly reinforces my fatherly images of God as cosmic hero, provider, protector, and savior for us all. I derive a tremendous amount of warmth, security, and hope from such a father-figure in my life, both in my family and in my whole spiritual development in relationship with God.

As I noted in the case study, however, there was a slow transformation over the course of my parents' marriage in which the balance of power and responsibility was shifted to a more even distribution between them. Indeed my father's illness very early on in their marriage added vulnerability to his status. His encounter with mortality and the hard truth that he could die at any time gave impetus to those changes in the balance of power. He particularly encouraged my mother to advance her skills in handling family business, and he supported her in the completion of her B.S. and her M.S. degrees in order that she might increase her earning power and be capable of supporting herself and me in the event of my father's death.

My mother's role in this small family unit, therefore, was not typical for women in the 50s in America. She went back to work teaching within the year after I was born in order to continue her career and keep her professional skills sharp and developing. She and my father split a lot

of child care duties between them, and they depended on a private baby-sitter and housekeeper for day care--a fairly typical dual career family pattern today, but not very typical then.

In this respect my parents' marital dyad grew into a very strong, well-balanced, dual-career, dual-responsibility unit. From my perspective in childhood my parents did not look like very different figures who were strongly separated by age and role. To me they appeared as a partnership of two responsible, hard-working adults, who cooperated strongly with each other in all aspects of parenting and family life.

Consequently, I have grown up with a high respect for women in the work place and a preconceived notion that men and women should share responsibility and power in the home on a fairly equal basis.

My mother's image to me presents me with an image of femininity of the woman who does it all: maintains a career, helps raise her child, takes primary responsibility for cooking and cleaning in the house (with occasional hired help), and takes a very active leadership role in church and community organizations. My mother was at one time or another president or leader of virtually every organization in which she volunteered her membership--including the state presidency of a national women teachers organization.

Her personal growth in career, education, and civic leadership positions was a very strong and positive role

model for me. My own personal advancement, even from early school days, imitates hers in many ways.

To me her example makes it easy for me to conceive of the nature of God and of God's leadership as not in any way being restricted to male stereotypes. The Biblical concept that both male and female bear and complete the image of God, and the idea that God includes in God's nature a partnership of male and female characteristics, traits, and strengths seems to me quite normal and natural.

The image of marital partnership, of course, allows for many analogies: the covenant relationships between human beings and God or between Christ and the church; the partnerships of persons who are united in Christ; the partnerships of various churches.

If there is a fair analogy between my parents' marital partnership and the partnership between God and God's people, then it is probably fair to assume that our relationship with God, like all relationships, is a relationship in process and that the parties in that relationship are going through growth, change, and reorientation. Both of my parents, for example, described a process of change in their relationship in which the balance of power shifted toward a kind of power which was shared and flexibly and cooperatively used, in which roles changed, job descriptions and responsibilities changed, and in which one party's change affected and effected change for the other.

The process school of theology⁵ in which Daniel Day Williams participated is particularly strong in working out images of God in a partnership with human beings; the dynamics are not unlike those of the marital partnership described above. This school of process theology conceptualizes God, in at least one aspect of God's being, as changing and acting responsively in relationship to the growth and change in human beings and in humanity as a whole.

Once we operate on this premise, the dynamics of human relationships would appear by analogy to have much to reveal to us about God and the nature of God's relationship with human beings and our response to God. The concept of a God who shares power with human beings in creative and redemptive ways would certainly seem appropriate to Christianity. Nonetheless, the image of a God who is flexible and who changes some roles with us in relationship to our growth and subsequent shifts of power is troublesome to those who prefer stability and security and fundamental, unshakable truth in their theology. The image of my parents' relationship reveals how it is possible for such a relationship to sustain constancy and stability while still allowing for some helpful process of growth, change and redemption.

⁵W. Norman Pittinger, "Process Thought: A Contemporary Trend in Theology," in Process Theology, ed. Ewert W. Cousins (New York: Newman Press, 1971), 22-36.

Furthermore, my parents' lives both reveal a process of human development across a time in history of radical social and technological change, depression, war, prosperity, and across some demanding personal moves from one culture to another. For example, my father was born in a log cabin and grew up in a culture more like that of the 18th century American frontier. He finished out his life in a rapidly modernizing, urbanizing American industrial and post-industrial society. My mother grew up among parents and siblings who spoke a Slavic dialect and whose culture, customs, and religion were directly imported from Eastern Europe into the coal camps of southern West Virginia. She grew up beyond the home, however, in an English-speaking school and culture where she was strongly assimilated into the American "melting pot" culture. By the time she reached adulthood she was extremely fluent in English and the ways of American and southern West Virginian culture, and could barely speak a few phrases of her parents' native tongue.

To see people adjust across such rapid changes in history and culture may be indicative to us by analogy that the God of history and culture most likely transcends the world's changes by a combination of constancy and flexible adaptation.

Process and Identity

Persons are constantly in process--processes of growing, aging, changing. Individual identity is something

which participates in the process and which also transcends it. Identity is formed or revealed through process, and yet we see much constancy in identity through processes of radical growth and change.

Both of my parents, for example, observed in me certain traits and features of personal identity which stayed with me from an early age. They observed that I did grow and learn, but that I somehow remained the same person.

For example, my father noted how I was very willing to grow and to change my behaviors, such as the way I responded to his suggestion that I be more friendly toward others at church when they greeted me. He suggested that I was always a responsive learner in such situations. Nonetheless, he also indicated that he saw no major changes in my personhood or identity as I grew up: "There was no radical change, no. It was just pretty much the same person gradually growing, and maturing, and developing...and that hasn't changed today. You're still the same person that you were back very young."

The image here of identity or personality as a matter which has a certain sameness, consistency, or continuity across time and processes of change, provides an intriguing foundation for analogical thinking and theological reflection. The essence of identity or personality which seems to be relatively consistent in a person, that which makes a person who he or she is, is also analogically related to matters which transcend individual personality.

For example, classical Christian theology has always recognized the concept of human nature, that a certain sameness exists among all human beings which makes us human; further, that that humanity is tainted by the nature of sin. One of our Christian claims about the significance of the Bible is that it reveals to us part of the nature and history of who we are as human beings, even though most of our Biblical documents are at least two thousand years old. Whenever we assert that the Bible has relevance to us today, we imply that a consistency exists in human nature across the generations and the centuries of our existence as a race. Even though tremendous change and advancement have taken place in the history of humanity, we acknowledge that there is still something about the human world and the essence of human nature which, though perhaps more complex, has not significantly changed.

The idea, of course, that there is such a thing as human nature is a matter of considerable speculation and debate in the fields of social and personality sciences. Freudian theory would tend to reinforce such a concept, while Marxist thought would contradict it. The idea of analogy presented here would not operate as a form of proof for scientific purposes, but in theological terms it can certainly be seen as a reinforcing construct.

In both of the interviews above, my parents revealed that a significant factor in my personal development and a key long-term crisis in my whole family system focused on

the diagnosis early in my childhood that I had been born with a coarctation of the aorta, a congenital defect which caused extremely high blood pressure in the upper part of my body and restricted blood flow to my lower body. While the symptoms created by this defect were not imposing or dramatic during my early childhood, they were destined to create major complications and ultimately my death by as early as age 25 if surgery were not performed.

The impact of this defect and the anticipation of its correction were stretched over a long and important part of my personal development since there was an eight-year lapse between the time of the exact diagnosis in 1957, and the actual surgery in 1965 at Johns Hopkins Hospital in Baltimore, Maryland.

The actual event of the surgery during the summer of 1965 was a mixture of blessing and crisis, since the corrective surgery was successful, but a concomitant infection seriously jeopardized my life and put me through a severe physical trauma which lasted for weeks. The experience of prayer and the spiritual issues which I encountered during that event led me to a strong commitment to an already developing personal sense of calling to ministry. This was for me a landmark turning point physically, emotionally, and spiritually, an event from which I emerged with a new concept of personal identity and direction, and a new feeling of hope and gratitude.

A person's creative imagination could probably conjure up several symbolic analogies in relation to this long-term crisis and its effects on identity formation. In particular I would focus on three: (1) the frame or identity of weakness and defectiveness; (2) the struggle in anticipation of the long awaited day of deliverance and salvation; and (3) the identity and blessing which one receives from the struggle itself.

First weakness and defect suggest two different kinds of meanings. Weakness may be associated by analogy with the underprivileged, the poor, the oppressed, the afflicted, the humble, needy people of the world who are favored and saved by God in Biblical tradition. Defect may be associated by analogy to the fallen nature of humanity, the defects of sin, character flaws, vulnerability to temptation, and the destructiveness of the dark side of our humanity.

Both of these kinds of images may have been governing symbols in the early formation of my identity. In the area of weakness in particular, my mother related the story of my sense of physical failure and inability to measure up when I tried out for Little League baseball. That kind of physical and athletic disability was for me a sign of inferiority. Since athletic ability was an important social value in my peer group, my sense of inferiority spilled over into feelings of social rejection which were verified for me whenever it came time to choose team members for any playground competition.

Within my family the weakness image tended to produce a certain overprotectiveness by my parents when it came to my participation in athletics. Whenever I got discouraged or felt like quitting, they were not eager to push me back out into the competition for fear of real physical danger to my health. In time I felt classified, labeled, and excluded because of my "defect" or weakness.

That defect bore a strong relationship to sin whenever I allowed it to be an excuse for failure or self-pity. While there is no direct cause and effect relationship here, I do see that the way I felt badly about myself because of my physical condition did bear an analogy to the way I felt badly about myself because of any moral failure or guilt which I experienced as a child. The analogy here is not a strong one since I felt less personally responsible for my physical weakness than I did for my moral guilt. Both, however, led to a sense of shame and a desire for a different way of being and feeling.

The above image leads directly to the second image, the struggle in anticipation of the long awaited day of deliverance and salvation. The Old Testament is filled with images of great anticipation of the day of the Lord, and the coming of the Messiah who would save the remnant of Israel and would restore the nation to its intended power. The New Testament presents us with images of the partial fulfillment of the messianic reign through the ministry, death, and resurrection of Jesus Christ, and the formation and ministry

of the church; and of new prophecy of a second coming of Christ, and another long awaited day of judgment and salvation when the problems of humanity will be ultimately resolved, and the powers of sin and death will be defeated.

In my own childhood imagination and personal development the day of my surgery was the long anticipated "Day of the Lord." That day would be a literal day of great change and salvation. Indeed, if the surgery were successful, my life would be saved and extended to a normal life expectancy. Also the limitations on my physical development would be lifted and I would be allowed to participate in school sports. It would be a day when a tremendous and oppressive darkness would be lifted from me, a day of exorcism and healing. In that respect I did not dread surgery, but happily looked forward to it as the "cure" for my life. I invested great expectations in what that surgery would do for me.

The reason for the eight-year delay from the time of diagnosis to the time of surgery was a matter of the then current medical opinion that fewer post-surgical developmental problems would occur if the surgery were delayed until I was nearer my ultimate adult body size. (Today medical research has reversed this opinion, and coarctation surgery is done near the time of diagnosis.) The experts at Johns Hopkins suggested surgery at the age of 14. I took them quite literally, and planned for surgery during the summer after my 14th birthday.

In the meantime I lived through some very long childhood years of anticipation. The struggle of living in a condition which you have been promised can and actually will be fixed is both a test of patience and a matter of hope. That struggle with my weakness and defectiveness, and the challenge of patience and hope was an experience which opened me by analogy to the experience of the people who have walked in darkness and who have seen a great light. (Isa. 9:2) The prophecy of hope was a very real and concrete experience in my life. Perhaps my faith in my medical deliverance was connected to a more general kind of faith in deliverance for my life.

There were also many times when the day of deliverance felt anxiously distant and unhelpful, and the present problem was the source of my present identity. My identity with weakness and struggle and inferiority is still a significant part of my memory and a significant part of who I am.

Thirdly, a source of identity and blessing also came through the struggle of my deliverance through surgery and its aftermath. It was a struggle which I identify by analogy to the story of Jacob wrestling through the night with the presence of God, being smote in the thigh and given a new name and a new blessing by God.

The actual event of surgery lived up to all I had anticipated, but it was also much more. It was indeed an event which corrected the problem with my aorta and

ultimately saved my life as promised, but it was also a catastrophic event which nearly killed me. The ultimate good results were anticipated, but the immediate crisis of post-surgical infection and a dramatic, physically traumatic struggle for my life were not anticipated. In a similar way we often anticipate the arrival of the Messiah in our lives, but we fail to anticipate the cost of the cross.

When Jacob wrestled with the Lord (Gen. 32:22) he was given the new name "Israel" which means, "the one who strives with God" (Gen. 32:28). In my own way the struggle for life by overcoming a massive staphylococcus infection on my lung was a form of wrestling through the night. Like Jacob, I came away from the event with a massive scar, and the identity of one who endures pain, faces death, and prevails by the grace of God. My new identity was the identity of one who is redeemed and saved from the curses of disease and deformity. My identity was personally felt as one who is blessed by a miracle, especially since there were aspects of my recovery which totally astonished the doctors on my case. My identity as one who is called by God for ministry was reinforced and sealed in prayerful covenants during my 35 days in the hospital. I had met the day of deliverance, but I discovered that it came at the cost of great personal struggle and a few permanent scars. So there was indeed a new day and a new beginning for me at age 14, but it also came by way of the Via Dolorosa.

In the years since this surgery the event has appeared more definitively in my mind as a key decisive point in my spiritual development, one of those moments when my sense of calling and identity seemed to crystalize. Many times I have associated that event in my life with the story of Jacob when he struggled through the night with that mysterious figure and came away with a limp and the name of Israel. In correspondence with Jacob's limp I had come away from my surgery with a temporary disability. My left lung had been left partially collapsed from all the scar tissue left by the infection. Also I definitely had a large outer scar on my body, which became for me symbolic of the branding mark of God. My life was no longer solely my own. It belonged to God. I had acknowledged as much and had committed my whole life, whatever amount of it remained, to God and to God's ministry in the world.

Without this medical history and the personal struggle entailed, my personal identity and sense of calling might well have been very different. For me the physical and medical story became a clear point of linkage to my spiritual story--a bridge by which I moved from the preliminary to the ultimate issues in my life.

As Daniel Day Willaims states in discussing an example of the principle of linkage: "The hunger of the body may become the symbolic expression of hunger of the soul for God."⁶

⁶Williams, The Minister and the Care of Souls, 27.

Certainly in my personal history the "hunger" of my body for correction was linked to my hunger for the God of my deliverance and salvation. My personal spiritual quest became a focal point for the spiritual concerns of my whole family system. During those years of anticipation, and especially during the time of my hospitalization and recovery, we were all drawn closer together in the power of prayer.

"One who strives with God," might well have been an appropriate second name for me through the event of my hospitalization. Certainly from that point my personal relationship and covenant with God became primary and central to my personal identity. Also my story is linked by analogy to the story of Israel in its anticipation of a Messiah, and the new community of the new covenant in Christ.

Triangle or Triad

Many family systems therapists have observed the significance of triangular units in families and other social systems.⁷ It appears that couples or dyads frequently involve third parties in their systems for the sake of relationship stability, for confirmation, reinforcement, or a changing intervention in their relational realities. Eric Berne's theory of Transactional

⁷Goldenberg and Goldenberg, 110-11.

Analysis included an analysis of intimacy-avoiding games in human interaction which frequently involved triangular social dynamics.⁸ In particular most games seem to involve players in one of three roles in what Transactional Analysis therapists call the "Drama Triangle": Victim, Persecutor, and Rescuer.⁹

Virtually all marital systems involve triangular relationships, especially where any children are included in the family system, or certainly where members of the families of origin have influence. Most family systems theorists see the primary strength of the marital dyad as critical to a healthy functioning family system:

The beginning of a family system whether functional or dysfunctional starts with the couple. They must form a "oneness" that places them squarely on one side of the fence, apart from others. The violation of generational boundaries in particular is the beginning of family dysfunction. The process of differentiation is one that must be made both by an individual and a couple. "Stuck-togetherness" or "enmeshment" is the result of an inability to separate from a family of origin with a concomitant overcloseness to a parent, spouse, or child. The boundaries are violated to the detriment of all.

Symbolically, the ability to "close a door," to shut out others, is vital for a healthy marriage in the thinking of family therapists. Husband and wife ought to have secrets from their parents and children. There should be an intimacy between them that maintains their privacy. Early researchers in schizophrenia noted the

⁸Robert A. Harper, The New Psychotherapies (Englewood Cliffs, N.J.: Prentice Hall, 1975), 80-82.

⁹John M. Dusay and Katherine Mulholland Dusay, "Transactional Analysis," in Current Psychotherapies, ed. Raymond J. Corsini (Itasca, Ill.: F. E. Peacock Publishers, 1979), 395.

obtrusiveness of parents into their children's lives and vice versa.

Another way of saying this is that in a good marriage the spouse is first and any others are second. Children-oriented marriages are always dysfunctional. Children ought to add meaning to a marriage and express the creativity and warmth of the parents, but they must always be subservient to the marital relationship. A man should always be a husband first and then a father, and a woman a wife first and then a mother.

Perhaps, paradoxically, the most successful parents are those in which each partner is spouse first and parent second. The reason seems to be that a normal married person does not need the child for fulfillment or to give life or the marriage meaning. Being satisfied in himself or herself and with the marriage, the spouse can give children freedom of choice. The child is not caught in the bind of conforming to the parent and being angry--or of "doing his own thing" and feeling guilty.

The triangle that exists among husband, wife, and child is kept less activated when the spouses are united. If they have a coalition, this prevents the child from forming a permanent alliance with one of the parents. It requires the child to seek a relationship with others of his own generation, especially with brothers and sisters.¹⁰

Vincent D. Foley in the above statement outlines a family systems approach to "healthy" triangles, in which the marital dyad is primary. Murray Bowen¹¹ is the theorist who is credited with seeing all family systems as a series of interlocking triangles which are the basic building blocks of any relationship system.

¹⁰Vincent D. Foley, "Family Therapy," Current Psychotherapies, ed. Raymond J. Corsini (Itasca, Ill.: F. E. Peacock Publishers, 1979), 472.

¹¹Murray Bowen, "The Use of Family Theory in Clinical Practice," Changing Families, ed. J. Haley (New York: Grune & Stratton, 1971).

In view of these family systems theory insights it is fairly obvious that my own family of origin was composed of a basic triangle of two parents and one child. How this particular triangle was part of a larger system of interlocking triangles was not so obvious.

What comes out very clearly in the interviews above is the fact that my parents made decisions, even before they were married to reinforce their alliance with each other vis a vis any children. In particular my father stated that, based on his negative experiences in his own family of origin regarding open differences between his parents, he insisted that he and my mother should always support one another in matters of child discipline. My own observation is that they successfully fulfilled their pact, and that there was always a greater intimacy of communication between the two of them than there was between either of them and me.

As a result, as Vincent Foley suggests above, I was encouraged to find relationships outside the family triangle since I had no brothers and sisters. In fact the daughter of the family next door--also an only child eight years my senior--became my surrogate big sister. We developed a remarkable affection and closeness with each other during those years we spent growing up together. Also various ones of my many first cousins who were very near my own age became surrogate siblings for me, especially when I was sent

off to live with them for a week or two at a time during the summers.

There was a tremendous stability in our three-person family system. That stability was also an enmeshing factor in terms of the strength of the pull toward me to stay a child in this family. When I reached the age of young adulthood and left for college, my parents both indicated above that they were extremely grieved. My mother said that the house was very empty. My father also said, "Big empty place." The power of the triangular dynamic was very strong, and breaking it was hard to do. In effect the triangle is still there, even though my father is deceased, and I live quite a distance away from my hometown.

Bowen's observation¹² that triangles are the basic building blocks of all family systems, and that networks of interlocking triangles may be found in all social systems, is a basic kind of empirical observation which may be of some use to us in our theological reflections. Certainly the analogy to Christianity's traditional Trinitarian formula appears to be significant. The establishment of a doctrine of the Holy Trinity early in the history of the church offered a stabilizing solution to many theological questions regarding Jesus' nature as the Christ, and his oneness with, yet human separation from, the creator.

¹²Ibid.

The notion that God is one, yet three persons, has been a logical theological stumbling block for many Christians over the centuries. Bowen's insight regarding triangles as fundamental building blocks and the enmeshing unity which occurs within them may help us to understand by analogy the considerable insight and wisdom of the doctrine of the Trinity. I doubt that there is much to be gained by pushing the analogy here too literally, but it may be a helpful matter for the work of theological reflection in pastoral care and counseling for us to look for the imago dei or the image of Christ not only in particular individuals who come to us for counseling but in the basic social units or triangles which present themselves dynamically in our work. To say that God is incarnate or at least imaged among us not only through individuals, but through systems, may be a critical insight in the work of pastoral care and counseling. It is also an insight which meshes with ancient doctrines of the church as the "Body of Christ."

Williams' principle of linkage may be relevant, therefore, to structures within family systems as well as to the individuals in those structures. For example, another pertinent analogy offered by Daniel Day Williams is the triangular dimension of any two-person relationship, especially a pastoral relationship, where Christ is the third person. Among other assertions, Williams offers the image of Christ as "the reality which stands between" persons, meaning "that there is given to each life the

possibility of a new way which involves a restoration to our right mind and the freedom to become a new person."¹³ In other words all human relationships are potentially triangular through God in Christ, and Williams seems to indicate that a very therapeutic, perhaps sacramental, dimension exists in such a triangle. Inasmuch as family therapists have observed a common human quest for triangular relationships in response to the tensions of dyadic relationships, by analogy and principle of linkage, a significant connection may exist between the quest for triangulation and the quest for God. Further in the individual's quest for God, Jesus as Christ completes a triangle in which Jesus is savior and mediator between the human and the divine. The third person is virtually necessary to resolve the tensions between the first two, God and humanity.

Summary

The theological reflections above have involved only a few basic images and their analogical connections for my own family of origin: Parents and God; Identity and Process; and Triangles or Triads. While the original interviews with my parents were conducted for the purpose of gaining a better understanding of my family and of myself from a family systems perspective, the subsequent theological reflection developed from the Williams principle of linkage

¹³Williams, The Minister and the Care of Souls, 68.

model has helped me to see strong connections between my family's experience and the larger archetypes and truths of Christian tradition.

Implications for Pastoral Practice

Daniel Day Williams' concept of the self-knowledge of the minister provides part of the rationale for the personal family of origin study included above. There are many means by which a minister acquires or encounters self-knowledge. The study of one's own family of origin provides one important source of such self-knowledge. The format of the study above provides a model by which seminarians and pastors may discover more about themselves and the dynamics of their family systems which continue to influence their lives.

Whether or not previous family patterns directly affect one's functioning in current behavioral and social patterns, the use of analogy enables us to link events and patterns in a symbolic relationship. For example, whether or not the triangle of my own family of origin, as discussed above, directly influences or determines my behavior in current triangular situations, the symbolic connection or analogy between two such triangles invites consideration of what such structures mean to each other.

During my counseling interactions with a young couple preparing for marriage, I could encounter many dynamics of behavior which overlap with those I experienced with my

parents. In a psychoanalytic perspective I might analyze the situation in terms of transference. From a theological perspective of analogy and linkage as I have discussed above, the connection between the two triangles is not necessarily determinative. That is, one triangle does not necessarily have a cause and effect relationship with the other. However, the symbolism in a marriage of covenant, or of intimacy, authority, male and female pattern, distribution of power, genealogical linkage in one triangle may inform such structures in the other.

For example, a young couple who come to me seeking help in building a marriage which begins with two different religious backgrounds may find me utilizing the relatively positive experience of my parents in a similar situation. On the other hand, my tendency to respect the privacy of my parents' relationship or to put them on pedestals of superhuman heroes may provide a symbolic pattern which would not serve me well when I attempted significant pastoral interventions with other couples.

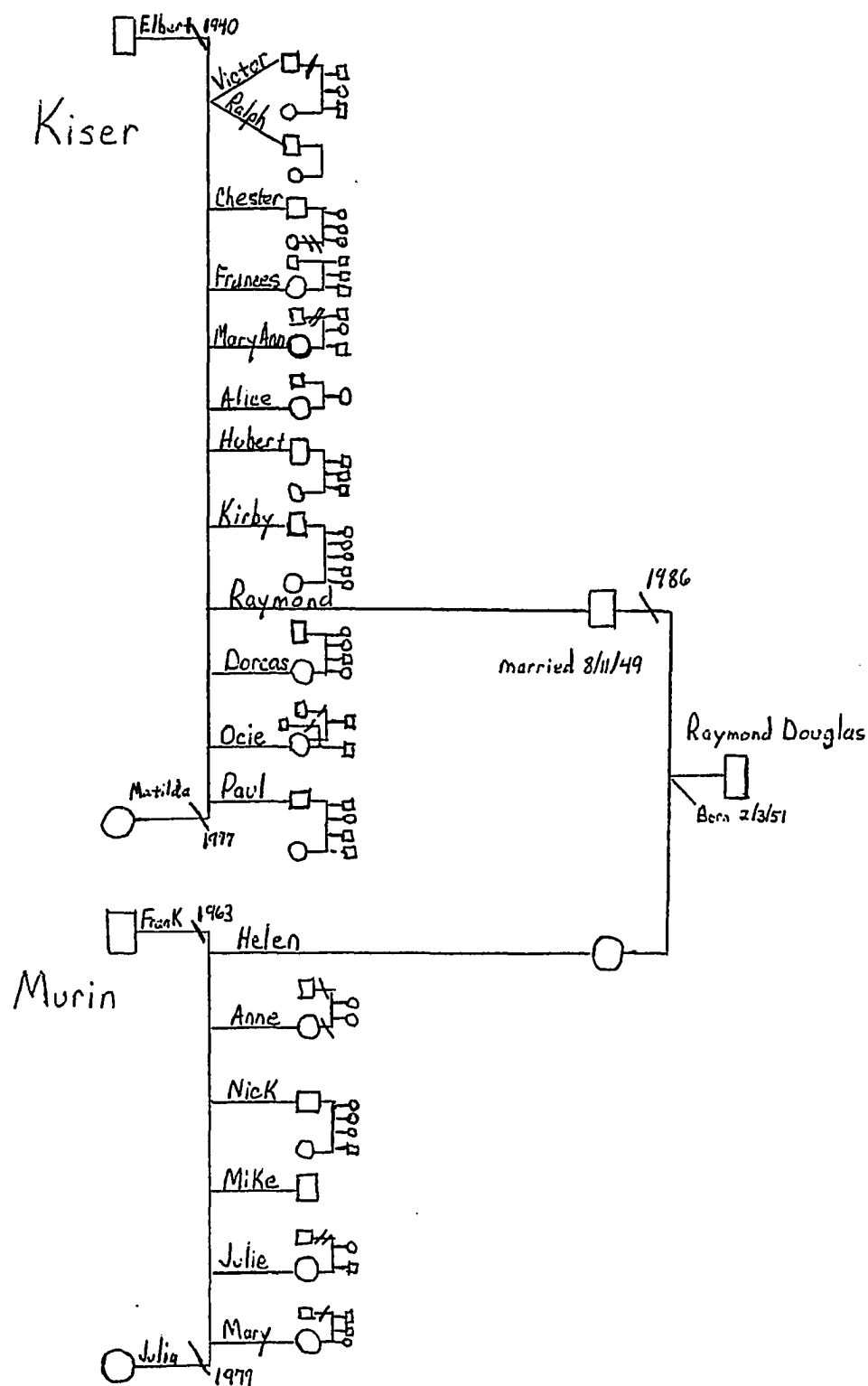
Again the analogical relationship between parent images and God images is very informative. One should be wary of anthropomorphism in developing portraits of God which bear striking resemblance to one's parents. Nonetheless, countless dynamics in parent-child relationships shed insight by analogy on the nature of our relationship with God. If a pastor preaches a Mother's Day or Father's Day sermon, he or she should beware of using illustrations which

cast parents in God-like stature. Yet it might be useful to consider how God may be much like a very human parent.

Parents and families of origin are potentially significant media, however, for the transmission of wisdom, symbols, and perhaps the ineffable essence of human spirituality. The Bible chronicles a religious tradition in which history, genealogy, the nature of one's origins, a whole people's origins, and the stories of those origins are critical to an understanding of God and of human relationships with God.

My experience in the study of my own family of origin includes a discovery that the more I know about my family, the more I become aware of a stream of symbols, traditions, and spiritual powers which have operated in my life on conscious and unconscious levels, perhaps since my birth. Such discovery has only reinforced my sense of authority in ministry and has enabled a greater congruence or authenticity in my pastoral activities. I believe that my experience here might be easily generalized and repeated in analogous ways in the lives of others.

Family Genogram



CHAPTER 5

A Case Study Interview: Linda

In the two previous chapters the proposed method of theological integration was employed with case studies in which the author had not participated with this particular theological approach in mind. In other words, the concept of theological integration was not a factor in the formation of the data.

This chapter includes a verbatim interview in which the presuppositions of this dissertation do play a part in some of the questions asked and responses given. The concern here is not only to consider the possibility of theological reflection by a counseling professional after an event in ministry, but also the possibility for an approach to theological reflection in the course of pastoral encounters.

The person in this case study, Linda (pseudonym), is a 38-year-old survivor of cancer. She lives with her husband, age 41, and her daughter, age 10. She was diagnosed with breast cancer and underwent surgery for a mastectomy six years ago when she was 32. While the doctors gave her great assurance of success in eliminating the cancer, the trauma of encountering such a deathly disease did not leave her.

She lived with lingering doubts that all cancer cells had actually been ridded from her body.

Three years after the first surgery, her fears were confirmed. She discovered a small lump in her chest wall where her breast had been removed. Upon reporting this to her doctor, he immediately removed the lump during a procedure in his office. When the pathology report indicated malignant tissue, the oncologist's recommendation was for immediate radiation therapy and chemotherapy in an attempt to destroy any microscopic remains of cancer cells anywhere in her body.

The ensuing treatment, especially the chemotherapy, produced a great physical trauma for her. Following the successful completion of her chemotherapy, she encountered deepened problems with anxiety and depression from which she has not fully recovered. Her symptoms included weight loss and insomnia, low energy and affect. In addition to the problems of depression in her struggle to function, there was an ongoing fear for her and her physicians that her continued, seemingly uncontrollable weight loss was symptomatic of more cancer or some other organic problem.

During the last three years she has seen a great variety of psychiatrists, psychologists, counselors, and therapists. She has tried many techniques to ease her problems. So far the best results have come through medical chemistry. She has finally discovered that her weight loss problems were directly correlated to the antidepressant

medication which her first psychiatrist had prescribed for her. She has since then dropped that psychiatrist, and has found a new psychiatrist and a more effective medication with fewer side effects. She has gained back about 30 pounds to what is for her still a normal and slender build. After the personal grief of losing all her hair during chemotherapy and wearing wigs, she now wears her own hair again in its natural color and at a length that is approaching her shoulders.

She still experiences problems with anxiety and depression, and does not sleep well at night. Her doctor recently informed her that she appears to have an organic emotional disorder which will likely require her to take medication and follow a doctor's care for the rest of her life.

Her husband is a lawyer who holds a steady job with a local bank, where he has been employed since before they were married over 14 years ago. He has been generally supportive of Linda, but has had difficulty understanding her continuing problems and feelings about them. He feels that she should have been able to put this matter behind her by now.

Linda admits that the stresses have been difficult on their marriage. She tends to use her husband as the only person with whom she can safely unload her anger and frustration. Also they have been sleeping separately for

some time because of her tossing and turning which would otherwise keep him awake at night.

She has not observed any significant difficulties for her daughter in these years, though she has shown much sensitive care and support. Interestingly, the daughter's early childhood chronic problems with asthma seemed to clear up at about the same time that Linda's cancer was diagnosed. No new problems with asthma have occurred.

Approximately five years ago she and her husband joined a local church for the first time in their married life. He had grown up Presbyterian and she, Roman Catholic. They joined the local United Methodist Church where their daughter had been enrolled in day care. Linda is now very active there, especially as a volunteer teacher.

Linda has a strong university education and certification for teaching. Prior to her marriage she worked in a special school for emotionally disturbed children. She has not worked steadily since her marriage, and she expresses the feeling that her current illness has disabled her. She simply does not have the emotional energy to go through a full day of working with children.

There is also an ongoing problem in Linda's family of origin. Linda is the third of three daughters, but she has a brother, 10 years younger than herself, who has been severely emotionally disturbed since early childhood. His level of functioning is not good enough for him to be on his own in society. Her parents, now in their retirement years,

are having increasing difficulty with him, yet refuse to deal yet with the alternative of having him institutionalized. Recently Linda's brother got violent with her mother during an argument and broke her back. The possible resolution of this problem for the family is still very unclear at this time.

My relationship with Linda is that of a long-time friend and pastoral supporter. I have known both her and her husband since college. Even though we live halfway across the country from each other, I manage to see them during my travels once every year or two.

The following verbatim is from a conversation in their home on July 12, 1990. Although she willingly agreed to participate in this conversation for the purposes of this study, she also admitted to anxiety about getting into the discussion. It is still a very live and painful matter in her life.

She indicated that she trusted me and was willing to share her personal story with me, but she had doubts about anything she could do for me in the area of theological reflection. I assured her that she did not have to think of herself as a theologian or even as a greatly spiritual person in order for me to find her conversation helpful for my work.

Basically I approached this conversation with an open mind to discover more of the particulars of her story and to look for "opportunities" of linkage for theological

reflection. I chose not to ask her specific religious questions, but rather to ask her about images and constructs of meaning.

Verbatim

L = Linda

R = Ray Kiser

1. R: To start with, help me with some of the basic facts. I have the history in my mind vaguely, but how long ago has this been since you first found out?
1. L: It's been six years. I had a mastectomy in June of 1984. So it's now July 1990, so it's been six years. I had a recurrence in the Spring of 1987. I had radiation and chemotherapy the rest of 1987. So it's been three years since then.
2. R: And ah, help me recall what it was like. What actually happened? You were diagnosed and it happened very quickly, right?
2. L: It was a complete surprise, yes. A lump which the doctor had assured me couldn't possibly be a tumor turned out to be a tumor. And the breast had to go, all in a matter of three days. So, it was not something I had been worrying about, or thinking I might have. You know, I had no preparation for the news. It was a total shock.

3. R: I remember...there was some time long after that when you weren't so much concerned about the mastectomy as about the idea of cancer. It was very threatening.
3. L: Absolutely. The loss of the breast didn't really bother me that much. You can get along without a breast very well. It was definitely the fear of cancer that I found overpowering at times.
4. R: You were 33 at the time?
4. L: Let's see...1984, I was 32.
5. R: And your daughter M was....
5. L: M was 3.
6. R: Yes....
6. L: And um, I had none of the risk factors for breast cancer, which made it harder to understand why it happened to me. There was no explanation for it. And so one of the common things that people do when they get a diagnosis of cancer is to try to figure out what they did wrong. You know, what did I do that made me get this? Was it a certain medication that I took for some other problem, or exposure to some contaminant in my own home? You know, what have I done? And you feel a real strong need to find that out, so you can avoid it in the future...because you don't want it to happen again. But, of course, they don't know at this point what causes breast cancer. And so there was no answer to that. But for quite a few weeks and months that was my chief concern: What did I do? How did I get this?

What caused it? And after a while you have to let go 'cause you know you'll never know. Maybe the next generation will know, but you'll probably never know for your case.

7. R: How did you feel like you were doing at that point? What's your own description of your own psychological process during that period of adjustment?

7. L: At the time of the mastectomy?

8. R: Yes.

8. L: Well, I coped with things that had to be coped with immediately very well. My surgeon complimented me on how well I was taking it, and when I got home I gave my exercises...and was very motivated to get back into full functioning as far as doing what needed to be done with my child and around the house. I was very motivated to get back to full steam and did so, I'd say, within three weeks. The physical recovery part was something I could focus on and work on, and see progress in day by day. Ah, the emotional part was harder, and I would have setbacks. And it would take very little to make me depressed; you know, just seeing the word "cancer" in the newspaper, or reading an obituary of someone who died of cancer was enough to scare me again. And it's so hard to avoid that. Just about every day in the paper there's something about cancer, or someone has died of cancer. And of course, there are often medical articles about different kinds

of cancer. And I would get petrified when I would read these things. And it would really set me back. And I would really be in a state of fear and worry.

9. R: What kind of things would you say the fear focused on? ...the fear of dying?

9. L: Yeah, the fear of dying.

10. R: The fear of the disease itself?

10. L: I don't know if I had fear of...of the pain, or disfigurement of the disease, or if it was fear of chemotherapy. I know I had that, and was very relieved after the mastectomy to find out that I didn't have to have any lymph nodes involved, and would not have to have chemotherapy. I was terrified of the prospect of chemotherapy. I didn't think I could survive that. I was afraid of that. I was really afraid of my not existing any more. Death to me meant that I would be completely taken away from my family, and especially my little girl. And I could not bear that thought...that a three-year-old, and she was still very much forming, and I was very closely involved with her every day. She had never been in a day care center. I had been with her and enjoying her every day. And I didn't want that to end. I didn't want her to have that trauma, and I didn't want me to have that trauma of separation.

11. R: Yes...I'm trying to recall.... There was an assurance from your doctor that you had gotten this thing licked.

11. L: Absolutely! He said, "I promise you. You will never have to deal with this again. You don't need to see an oncologist, and you're (her voice volume rises strongly here) 98% cured! I've never seen a case reoccur like yours. We've had such a small tumor, and it was caught so early, and no lymph nodes." He virtually promised me that I was finished dealing with cancer.
12. R: And you had some lingering doubts that you weren't?
12. L: Oh, I think everyone's afraid that there are still some cells in there. And sure enough there were. And the things I read, and the a...I went to a couple of lectures or programs about breast cancer that scared me more, because they basically said that once you have had a tumor you always have cancer cells circulating in your body. It's a matter of your immune system dealing with it. And that's a scary thought that you have always got that...that evil invader in your system. Once you've got it, you've always got it. And that's very frightening. So, I found out that I needed to stay away from lectures or programs on cancer.... All they did was scare me.
13. R: A little too much reality there....
13. L: I didn't want to hear that. All I wanted to hear was that I was cured. And my surgeon was very reassuring about that. Um, an oncologist that I did consult was also quite reassuring. But the percentages

she gave me were not quite so good. She said something on at 80%. So it was coming down a little bit from 98% to 80%, and then I read something in a book at the library that same summer that said 75%. I was getting a little more uncomfortable as these percentages were going down. And it was sounding like even without lymph node involvement, you still had a chance of recurrence. You know, that was the reality in the literature. So I could not be totally comfortable with thinking that I was cured. Although over a period of time--over a couple of years--I think I relaxed about it, and began to believe that I was finished with it. 'Cause they said that a recurrence usually happens within two years if it was going to, and I had gone on for two years, and nothing had happened. And I went almost three years. It was about two and a half years when my recurrence was found.

14. R: Tell me about that.

14. L: Well, it was a Saturday night...I had changed into my nightie, and I was just sitting in the den, and I was for some reason running my hand over my chest, just absent-mindedly, not examining myself in any purposeful way, but just sort of, like you might run your hand over your arm or head or something.... And I landed, my finger landed on a lump. And I said, "Uh-oh," and was immediately frightened. And since it was a Saturday, I couldn't do anything about it, but that Monday, I

called my surgeon's office, and I think I got in to see him about Thursday. And when I went into his office, I told him I had found a lump on the same side. And he said, "Well, don't tell me where it is. Let me see if I can find it. So I lay back on the table and he found it right away. And he said, "We'd be stupid not to take this out. So let's take it out right now." So right there in his office, he gave me a little local anesthetic, and a very small incision, and he took it out. And with his tweezers he pulls out this thing that looked like a kidney bean, and showed it to me. I said, "What is it?" He said, "I don't know. We'll just have to send it to the lab, and see what they say." And I imagine that he knew, but he didn't want to terrify me at that point. And this was right before Easter weekend. It was a Thursday afternoon, and I was a little worried that I would have to wait over Easter weekend before the lab results would come back. And he said, "Well, if I get it out to them today, we should know tomorrow." So I called Friday afternoon, and they had no answer for me. Either he wasn't there, or the lab work hadn't come back yet. So I was going to have to wait through Saturday, Sunday and Monday, since Monday was a holiday. And it was a tortuous weekend. I was so worried. And I was pretty well certain that it was something bad. And he called the house Monday evening, and J (her husband) answered the phone, and he

talked to J and said that it was...a recurrence of breast cancer, and that I needed to come in and talk to him the next day. So I went in to talk to him the next day, and he had made a referral for me to go over to Baptist Hospital to see a radiation therapist, because that was the next course of action...was to have radiation therapy. He still did not say anything about chemotherapy. So I asked questions about radiation, and it sounded like something I could get through. He said, "About four weeks, and you may just feel a little tired." Well, it turned out to be at 7 weeks. And it turned out that I also needed chemotherapy. And I didn't find that out until I went for that first visit at Baptist. The radiation therapist....

15. R: They didn't have any further surgery that they needed to do....
15. L: No, he had taken out the lump. That's all it was. Ah...they ran tests on me. They did the blood work, the bone scan. My bone scan showed some spots on my back. So I had another weekend where I had to wait to find out what those spots on my bone scan were. I was seen on a Friday, but they couldn't confirm anything until Monday. I had to come in Monday and get a CT scan on my back. So I'm in a state of terror over another weekend, you know, that this thing has already spread to my bones. I had the CT scan, and it showed nothing. So apparently, the bone scan had just picked

up some...nothing, some spots that were nothing. So that was good news, that there was no spread that they could find, but they said that they had consulted with an oncologist, Dr. P, by this time, and decided that the wisest course of action was for me to have chemotherapy, just as a preventive because there could be other cells circulating in my body, and to be safe I really should have chemotherapy. And that came as a very big blow. I cried when they told me that, because I really didn't think I could make it through chemotherapy. I had seen the movies, the TV shows, heard the horror stories about how terrible it was. And uh, my doctor reassured me somewhat that they had learned in recent years that a shorter course of treatment and lower dosages of the drugs were just as effective. So the side effects might not be as bad as they used to be. In any event, it wouldn't last as long as I had been afraid. It was only going to be, ah, four months. So I thought, I can survive four months of anything. I can survive this. So we went from there.

16. R: Were there any assurances with that of the value of the chemotherapy, in terms of the price you were having to pay in going through it? Was there any greater peace of mind that they were able to offer you?
16. L: Oncologists are very careful not to make promises, unlike surgeons. Oncologists will tell you that

there's no guarantee that your chances are better if you do this. And my oncologist is a very upbeat guy, and he really gave me the hard sell on how I should do this, and how it would guarantee that I would be around to see my little girl graduate from high school. And, of course, there was no way I was going to say, "No, I won't do it." Of course, I was going to do it if it was going to give me a chance to be around for a long time. I never thought of not doing it. If they thought that I needed it, then I was going to do it. So they told me it was going to improve my chances, but they didn't tell me that it was a cure all.

17. R: So your chemotherapy lasted four months....

17 L: Yes, I started July 4th weekend and went through the end of October.

18. R: Help remind me a little bit about what that was like...I remember you went through some body changes and lost your hair.

18. L: Yeah, I lost my hair everywhere--even my eyelashes and eyebrows. That was the most traumatic side effect for me. Many people have a lot of nausea and vomiting, and thankfully, I was not one of those people. I did not get nauseated. I did not vomit at all. And I was really thankful for that, because I don't know if I could have gone back for each additional treatment if I had gotten that sick to my stomach each time. So many people do. And luckily the anti-nausea drugs they gave

me worked, or else I just wasn't one of those people who reacted that way. I did not have to deal with that terrible nausea. I had other side effects, which were at times painful and uncomfortable. I had...uh, my arm would be in great pain from the drugs that had been in my vein. I had to use hot compresses for about a week on my arm. My hand had a chemotherapy burn where they had put the needle in. And I had jaw pain, and neck pain, and abdominal cramps...um, and tiredness. It takes a lot of your strength to have those toxic substances in your body killing off your cells, and still try to maintain your energy. But I did not have any major infections or problems during that time. I did not have to be hospitalized at all, and I'm thankful for that, because I'm afraid of hospitals. And I did not have to go to a hospital for the chemotherapy. That was in my own private doctor's office. The radiation therapy was at a hospital every day for seven weeks. But the chemo was in a less scary setting, although it took on its own scary content for me after going through it once or twice. Walking in that office still triggers fear and nervousness....

19. R: Hospitals are frightening places.

19. L: I hate hospitals. I even hate the parking lots of hospitals. (We laugh.) I even hate to see them from the interstate. I don't like hospitals, or doctors' offices. And unfortunately, once you have been through

a cancer experience, you have to keep seeing doctors for the rest of your life on a very regular basis.

20. R: Had you always felt that way, or is this more recently associated with the event of the cancer?
20. L: Well, it certainly has been intensified by my cancer experience and my fear associated with my cancer experience. I was never crazy about hospitals, but I didn't react to them the way I do now.
21. R: Um...I think that maybe with the exception of your accident (referring to an auto accident she was in when she was in college) you probably hadn't gone through anything even approaching this kind of physical trauma.
21. L: That's probably true. Childbirth is a pretty traumatic physical experience, but it's a very happy emotional experience. So that's true. That's probably the biggest trauma--emotional trauma--of my life.
22. R: I can certainly imagine that it would be.
22. L: 'Cause it is truly life-threatening....
23. R: And it happened at an age when we're not expecting to be dealing with it.
23. L: Right. This is not supposed to hit 32-year-olds. The average age for breast cancer is 57. It hit me 25 years early, and that made me mad. I was supposed to have 24 more good years at least before dealing with this kind of thing. And when I go to the doctor's office, that's one of the things that I'm uncomfortable about, is that I look around the waiting room, and the

other people there are old people. And here I am still a fairly young person, and I'm in the same group as these people.

24. R: It feels very unfair...I was going to ask you earlier if you didn't feel just a tremendous amount of anger about it.... And what do you do with anger?
24. L: Everybody tries to assume that I'm angry, and that I have all this repressed anger...and I may, but I'm so busy trying to cope day to day, and I have realities of day to day life to deal with. I have a child, and there is really no way to let your anger out if you're trying to get along with your family. I am hostile toward my husband quite a bit, 'cause I know that he can handle it. He doesn't like it, but it's a little different than picking on my child. I try very hard to always be a good mother. I figure that's what I'm still here for, to finish that job. My anger comes out at my husband, unfortunately....
25. R: It's been hard on the marriage at times....
25. L: O yeah.... It really puts a stress on a marriage. And I don't think that he can verbalize or even know how he feels. And uh...he doesn't seem to want to talk about the subject. And if I bring it up he accuses me of being negative. He does have a really hard time.... He's gotten better over the years as he has realized that this is going to be a life-long issue. And if he's going to stick with me, he's going to have to

learn how to deal with it, and deal with me. But his initial reaction after the mastectomy was, "Forget it. It's behind you. You're well. Act like you're well. Don't act depressed." And when I did act depressed he would withdraw from me and avoid me, which would make me more depressed and make me mad, because I felt that I deserved some comfort from him and some understanding from him. And he was not able to give it at that time. He did support me quite well through the chemotherapy and radiation...but.... It will be a life-long stress on our marriage, because I'm on a roller coaster. Emotionally and physically, I'll have days when I don't feel so hot. I don't have the stamina that I should have for my age. And I try very hard to do all the things that are good for me, and to spend my time well. And I still feel that he is critical of me for not doing better, not being perfect, not being well, like he is....

26. R: Like there's this expectation that you can get this thing behind you, and why haven't you done that yet?

26. L: O, yes. Yes. And he has said, "If it were me I would have put it behind me. I wouldn't have got depressed." Well, you don't know until it happens to you. You can say that, but you don't know. And I feel that sometimes he doesn't appreciate how hard I have to struggle every day, just to keep going. And we will come to strong words every now and then. And the

resentments will be expressed back and forth. And then things will be quiet for a time. And then they may flare up again, and be quiet for a time. So it's not really a predictable thing. If I'm particularly hostile on a particular occasion, maybe a couple of days later I'll hear about the resentment that he has towards me, because of the way I'm treating him. And then, of course, I tell him how I'm feeling, which...I try to defend myself, because I don't think that he understands all of where I'm coming from....

27. R: It's interesting that you see him as...the one safe relationship in your life for letting go of some of your anger.

27. L: Well, ah, unfortunately they say that, you know, the one that you're closest to is the one that you can treat the worst...that you trust enough to let it out. And I really regret that. He doesn't deserve it. He hasn't done anything to deserve it, but who else am I going to get mad at? He's the only other one around. I'm not going to beat my child, or abuse my child, or be mean to her....

28. R: Do you ever talk about this? Does he understand?

28. L: Well, I told him the other night...um...because I had called him up at work one day recently and said something angry. And he got mad about that...told me he didn't appreciate being called up at work and blown away. And I said, "Well, the reason I did that is that

I didn't want to fight in front of M (daughter)." I've really tried to protect her from this. But she probably senses some of the tension anyway, but I...I try not to be too bad in front of her. And I don't know if he appreciates that aspect of it.... (pause)

29. R: How is it right now? For example, let me back up. You mentioned earlier that, day to day, it's still a struggle. What's that like? What's the day to day stuff now?

29. L: (long pause) I'm actually not doing too badly.... I have been put on a medication, an anti-depressant that makes me feel pretty functional, pretty good most of the time. I had had severe insomnia, starting back in 1988. After the chemotherapy was over I was hit all of a sudden with total inability to sleep, which makes a wreck out of you very fast. And so I was referred to psychiatric help, and I took advantage of it. You know, I said, "Help me. Help me. Help me." And they put me on medications that helped me sleep, but didn't completely make me feel good either. There were still a lot of issues that I had to talk about, and I went through talk therapy for about 10 months. And...it helped some during that period immediately after chemotherapy. But it didn't help completely, 'cause, of course, they couldn't change the circumstances of my life. They couldn't change the fact that I had cancer. Ah, and...I think they also had me on the wrong

medication, because I lost weight, and got down to 99 pounds, and went through all kinds of medical tests and worries, and frequent visits to find out why I kept losing weight. And when my oncologist said, "I think it might be this anti-depressant you're taking," and switched my medication, I immediately began to gain the weight back.

30. R: So you were able to isolate that...to your medication.

30. L: I think it was responsible, because once I got off it, I started to gain weight right away. And I had been eating well all along. It wasn't that I wasn't eating enough. I think the psychiatrist didn't believe me that I was eating well. I was eating like a horse, and still losing weight. And it was terrifying 'cause I was down to skin and bones, and had to sit on a cushion. I couldn't even sit on a hard chair.

31. R: You kept asking yourself, "What's wrong with me?"

31. L: What's wrong with me?! And my oncologist was very worried about what was wrong with me. He couldn't find any evidence of a problem. Tested for everything he could think of. And so, ah, I think the medication was responsible. So I had considerable anger towards that psychiatrist, who didn't have the sense to know that this medication caused weight loss...and put me through so much worry. So I did not go back to that psychiatrist. I did not see anyone for a

while...probably for about a year. And then I tried--I was still having sleep problems, still having to take medication for sleep. And I was really frustrated about that. Sometimes it wouldn't work. So insomnia was this constant problem I was having to deal with. I was obsessed with the insomnia problem, and I was addicted to the sleeping pills. And ah, at the suggestion of my oncologist I went to see a biofeedback specialist who works with relaxation training. And I worked with him for three months last summer and tried weaning off my sleeping pills. (During a brief gap while the tape was being turned here, she moved on to describe another therapy.) And I was actually going in several times a week for the Reke treatments, thinking, "I'll try anything. I am so desperate. I'll try anything." So he would put his hands on my head, and on my eyes.... And then he'd get a group of people, and they'd all put their hands on different parts of me. It was very peaceful, and relaxing, and comforting, but it did not solve the basic dysfunction of my nervous system. And I was losing sleep at a horrible rate. I was getting zero sleep, night after night after night, which makes you physically sick. After a few nights I was physically sick. So I went back on the pills, because I had to get some sleep. And really ah...probably had what you would call a nervous

breakdown, last summer while away on vacation. And
ah....

32. R: What was that?

32. L: I had many nervous system symptoms like twitching, and stuttering, and ah, my throat would close up. I couldn't eat. My digestive track was all messed up. I was losing weight. I was very depressed. I could not go out and enjoy the beach. I couldn't go to a restaurant. I was not myself. I was really scared. There was something wrong with my nervous system. And so after we got back home, I immediately went to a new psychiatrist, who put me on a new medication which straightened me out...and have been on that ever since. So I have not had severe insomnia. I have occasional insomnia. But ah...that seems to be under fairly good control. I'm still not happy about being dependent on medication, but have learned that this is a biological problem, not a weakness in my character, not just a stress reaction. This is a chemical imbalance.

33. R: It's organic....

33. L: This is organic, and something I'm just going to have to live with, and take medication for the rest of my life--is what I was told...this week.

34. R: Just this week you heard that?

34. L: Yeah. I was told I will be among the 15% of the population that does not get over a depression and anxiety disorder, and I just will probably need

medication for the rest of my life. And that upset me. That depressed me... 'cause ah.... It's hard to be told that you have a mental illness, and you're not going to get better. I don't like that.

35. R: That's certainly what it feels like anyway...that that's what he's saying, that you have a problem that is just not going to go away.

35. L: Right. He said, the fact that it's lasted this long, three years, is a pretty good indicator that I'm stuck with it. I was very unhappy to hear that. I was hoping that this period, this phase of my life would be over at some point, and I could go back to normal. It causes a lot of problems when you can't sleep. You're irritable the next day. Ah, I cannot sleep with my husband anymore, because I toss and turn and I keep him awake, and he keeps me awake.... So we have to sleep separately, and that's not an ideal situation by any means. But I have come to basically accept that I have a sleeping problem, and it's something at least that can be treated. And if I get decent sleep then I can have a good day. So I just try to have good days. I try not to worry about whether I'm going to sleep that night or not.

36. R: You used a couple of terms that...I think have as much power or maybe stigma to them as cancer when you talk about, say "mental illness" or "nervous breakdown."

36. L: Uhum (yes). Very scary. Until it happens to you, you don't know what it feels like. It's easy to say, "That's something that happens to other people." And a lot of people still associate that with laziness, or not trying to get over something. My mother-in-law is especially bad for criticizing me for not just...you know, picking myself up and getting over it. That's pretty much where my husband gets his attitudes from, but he is also learning that it's not just something you easily shake off. It's an organic thing. And I think he has become more sympathetic towards that problem. My mother-in-law will never be sympathetic, but I don't have to see her every day.... I can...if I step back and look at my case study, if it were somebody else's, I can certainly understand and be sympathetic that somebody who went through what I went through would have depression and anxiety. Who wouldn't? But I have such high expectations of myself, I don't think of myself as somebody who's mentally disturbed, because I've been a pretty strong trooper, and gotten through tough things before. And uh... it's only when I think of this as a biological problem, that I am really not responsible for, that I can accept it. And my current psychiatrist definitely takes that point of view. He says more and more we are learning that most mental illness is a biological disorder in the brain, and we don't know very much about it yet, but

we're learning that certain drugs help certain conditions that previously were thought to be "all in the head" or whatever you want to say.

37. R: Right. Well, certainly they help. Obviously you were taking anti-depressants, and we've known about chemical treatment for depression for a while...but ah.... There also seems to be more than an organic relationship in certain areas of the history of your depression. Obviously it makes sense, like you said if you look at your case study that you're going to deal with depression and anxiety in dealing with what you've gone through. And um...what I'm thinking about is how difficult that is to sort out for yourself...sometimes.

37. L: It's very difficult, 'cause you want it to be behind you. I would LOVE to put all this behind me, and never think about it again. Unfortunately your unconscious mind has a way of holding on to these things. And ah...I guess that's what insomnia is all about. Nobody wants to be well more than the patient wants to be well.

38. R: You get a feeling of helplessness about it....

38. L: Well, it's a feeling like, well I have tried everything. I've checked books out from the library. I have gone to numerous therapists and counselors. I have taken stress management courses. I have tried everything, and not been able to get myself back to normal. And that's what's frustrating. It isn't as if

I hadn't tried to help myself, because I really have. I'm always trying new ideas, asking my doctor, "How about this?" or "Do you think I should try this?" And it has come down to...I've exhausted all the options. After going through this Bio-feedback man and the Reke treatments, I've figured I'm at the end of the line here. I have gone all the way as far as I can go as far as try alternative treatments to handle stress, and my nerve system is not responding. So it has to be biological.

39. R: You know, one of the questions I was going to ask basically is, "What has helped, and what hasn't?" And you've already answered that, that there are a lot of things you've tried, and it has come down basically to a medical treatment.

39. L: I would have to say so. The other things that I've tried, you know, have had positive effects of their own, for example, exercising. You know, it's enjoyable in its own right, not that it cured my insomnia. I enjoy being outdoors...getting myself involved in a lot of volunteer activities. It didn't cure the insomnia, but it made me feel good. It was a good way to spend my time. It has been a social outlet for me. It has given me feelings of accomplishment that I'm using my time well. So I wouldn't say that they have been a waste of time. It just didn't cure the biological problem.

40. R: What would you say to me, or anyone, for that matter, who is trying to understand the kind of depression that you've gone through...to explain what it's like?
40. L: I would say give yourself some time, and don't be so hard on yourself. I think I expected improvement too fast. I expected myself to be OK as soon as chemotherapy was over. I was so surprised when I was hit by this wall of depression, and I have since been told that this is what happens to everybody. When they finish chemotherapy everybody goes into a depression. So I would counsel somebody to understand that this is common. You're going to have to stick it out for a while. Do what you can to help yourself, and do seek ah...do seek help. Even get medication if you need it. If you can't get help any other way, medication can help. Be careful about tranquilizers, because some of them are addictive. I fell into that trap. But ask for medical advice, and accept it, and let yourself go through a period of adjustment to whatever it is, because you can't just tell yourself to get well. It doesn't work like that. And try to be around other people. The isolation is not good for you....
41. R: It kind of has its own momentum to it, doesn't it... that you tend to isolate yourself more because you don't feel up for being with people.

41. L: Yes. Exactly. And I have tried to not do that. I've made a point of going to church, and being a volunteer tutor, and having lots of other volunteer activities so I would not say home.
42. R: You at least had the energy to do that.
42. L: Oh, lots of days I don't, but I force myself to. And usually once I get there I feel OK. Some days I don't have the desire or the momentum at first, but after I get there I'm OK.
43. R: So it's sort of a discipline of habit?
43. L: Yes, it's good to have things on your calendar that you know you're going to get up for, and you're going to do that day. Otherwise you might not do anything. I also take a great delight in reading. And that is something that...I get a lot of pleasure from. It doesn't take any physical strength or energy. I like to read many different kinds of books--not medical books! I do NOT read medical books! I read ah...I read non-fiction and fiction, and that I just enjoy. So that has been a good outlet for me too... something I can just do by myself, for myself.
44. R: (long pause) The things I'm exploring for now are a little more intangible. I'm looking for connections, in terms of, when I say "connections"...perhaps raising our conversation to a more metaphysical level to talk about spiritual things...about uhm some of the issues,

some of what you've learned in this. How has this...how have you, Linda, changed through this experience? What have you learned about life through this experience?

44. L: That you can't take it for granted...that you should live your life the way you want to live it every day, because you don't know how much longer you have. Ah, I was not into vices or anything bad before. It's not that cancer taught me to clean up my act. Because I was basically a straight arrow before. Some people use the cancer experience to clean up their act, if they had been doing...had some rotten habits or were doing some bad things before, they turned themselves around. I can't point to any vices that I had before. Ah, that's not to say that I was a saint, but.... It hasn't made any big, big changes in my life except (she laughs) that I'm not the same person any more. And that's an enormous change when you're not the same person any more. And you do have the spectre of death hanging pretty close behind you all the time. And it therefore changes your priorities, and what you value, and what you want to do with your time.

45. R: For example....

45. L: Ah, for example, if somebody asks me to do something that I don't want to do, I will say, "No, I don't want to do that." Whereas before I might have felt obliged to say, "Yes," or guilty if I said, "No."

I now feel that I have permission to say, "No." And I have permission to seek out the things that I enjoy, that give me peace and comfort, and pleasure, and to spend my days the way I want to. Fortunately, I don't have to work to support myself. I have the luxury of choosing how I spend my time during the day. And so I have fortunately found things to do in this community that I really enjoy. And those are the things I choose to do, and I don't do the things I don't like any more. I don't let anyone force me into doing something I don't want to do.

46. R: You mentioned, as you were saying that...living with the fact that you were not the same person that you were. Or a couple of times you referred to desiring to be normal again. I assume that that has to do with things like free of insomnia and the symptoms of depression. But I wonder... out loud...if there isn't a kind of grief about that too. There's a grief about a lost person and perhaps some lost dreams.

46. L: O there is a grief about it. Absolutely. I cried about that this week in fact.

47. R: Yeah, for example....

47. L: It finally came out, that I told J (husband) that I am not the person I was, and I felt so bad about that. He said, "Well who is?" And I said, "Well you are. You still have all your physical abilities, your mental abilities. Your career is on the rise." You know I see

his life path as being sort of opposite to me. I peaked out early I think, and right now I'm struggling to stay on an even keel. And I do feel that a lot of doors are closed to me now, because I simply do not have the physical stamina to do the job that I am trained to do, which is to be a teacher. I cannot do it. I don't have the physical stamina or the stress tolerance to handle a group of children all day, and that....

48. R: I know a lot of people who would claim to be normal who would have the same problem, but go ahead....

48. L: Yeah, but there is some anger and some grief over that... that I can't do what I'm trained to do. I can do it in small doses, which is why I teach Sunday School, and why I volunteer to lead children on tours.... And I can be in a teaching role with a small group of children for a short length of time. So that's what I do to keep a hand in it.

49. R: A strange thought just crossed my mind: Do you ever get a sense that maybe, ah, you're more in touch with some realities than the rest of the world?

49. L: Yes. I think that I have my priorities pretty straight, and I think that I see the tragedies of the world very clearly. And I'm not at all caught up in consumerism. I don't care anything about material possessions or status in a societal sense. I don't care about living in the right neighborhood, or driving

the right car, or belonging to the right club. That means nothing. I feel like I do have a pretty clear vision of what's important, and what's beautiful, and what's tragic about the whole world.

50. R: Again that interests me. Can you elaborate on that a little? What's an example of what's tragic, and what's an example of some things that are beautiful?

50. L: What's tragic to me is the destruction of the environment...the pollution of the environment...the cutting down of the rain forests...the loss of species. I think that each species is precious and important, and deserves to live. I think mankind is destroying the earth at a very rapid pace right now. Our air is polluted. Our water is polluted. And I find that to be tragic. Man's intelligence has created products which have resulted in the pollution of our environment. And it may in fact be the cause of some of our cancers.

51. R: Very definitely.

51. L: The beautiful things that I see are also what's left of nature and wildlife that hasn't been destroyed yet. Ah, I was in a tropical rain forest in Puerto Rico last year, and thought I was in heaven, thought I was in paradise, to all those flowers that I'd never seen before, and all those beautiful huge trees--such a lush environment. I thought...well, for a moment I thought, I'm not afraid to die anymore because this is

paradise, and I would love to be in a place like this. You know, this could be what heaven is like. And I think the person-to-person things are very important.... Supporting your family members when they're having troubles...being a friend to others...taking good care of animals and plants...trying to make the world more beautiful. To me those are the important things.

52. R: Sometimes it makes you wonder.... Maybe going back to being the old Linda isn't the ideal either. What you would long for would be a synthesized new person...someone who brings with you the wisdom of what you've learned with what feels healthier, a healthy body.

52. L: Yes, the wisdom, and the healthy body, that would be nice. And with luck I'll still be around for some years to come.

53. R: I hope so. I certainly hope so. Do they tell you anything more about that in terms of prognosis?

53. L: It's not something that they can make promises about, but they can say that every day that goes by is on your side. Every month that goes by that you don't have a recurrence is on your side. And the fact that I have gone three years since my treatment is a good sign. It means I may be one who hangs on a long time. I hope so. Most recurrences occur within two years of treatment. So if I was going to have another one crop

up, most likely it would have happened already--which is not to say it still can't happen. They won't tell me that. They can never tell me that, but I feel like if I just keep focused on the present day and get through one day and the next, and the next day... and before you know it, months have gone by, and you've been healthy. So I try not to think too much about what the cancer might be doing in my body right now, as long as I feel healthy. Now when I feel sick occasionally...I have days when I don't feel well, or my stomach's upset, or I have a cold just like anybody else. And I get scared. I get scared that I don't have an ordinary virus or a cold. I get scared that I've got liver cancer or lung cancer. So it's a little harder to accept normal illnesses, because you're afraid that it's a sign of the final shoe dropping. You know, this is it. So I'm thankful when I feel healthy.

54. R: I'm shifting gears again a little bit, and going in a different direction...thinking about, simply about images... images of your experience. It could be anything. One general image I hear you talking about is ah, feeling very vulnerable...that your body has been invaded, and that it's this ongoing battle with this invader. Most of the time you're on top of it and feel like you're OK, and you're well enough to

function, but there's this lingering sense that ah there's this malevolent presence dwelling with you....

54. L: And you don't know. You don't know, but you have that fear. One bad cell could remain, could take off. And basically doctors can't give you any assurance that there isn't a bad cell somewhere, or that whatever caused your cancer in the first place might not crank up and cause it again. We just don't know enough about it...what causes it. So you have to understand that, realize that, but not dwell on it, not think about it.
55. R: What kind of...if you were to do some image making, what kind of images would you draw? If you were going to do some personal art work, what kinds of images would you draw to communicate some of your experience with depression or with cancer?
55. L: It's interesting I went to a workshop led by Bernie Siegel. You may have read some of his books. He's a surgeon who has crossed over into the metaphysical sphere. He does a lot of counseling with cancer patients, and started a support group of cancer patients, and does a lot of visualization training and imagery. And he has them draw pictures of how they see their cancer and their treatment. And when I went to his workshop, and he passed out the crayons and paper and said draw a picture of your family with you in it. I drew a picture of us camping. And I noticed afterwards that I had drawn a picture of myself, and I

was in the background. So it's kind of like a detachment. The cancer experience pulls you away from your loved ones and from the things you enjoy in life for a while. And you fear that it's going to pull you further away. You see yourself sometimes as being left out. And I'm very, very sensitive being left out, which is why I get mad at my husband sometimes...he makes a decision without talking to me first...because he's left me out. And, of course, dying is the ultimate in being left out. Life goes on without you. And I don't want to be left out.

56. R: It's sort of an image that life is something that's going on here, and you're kind of here, and death is over here...and that sometimes you're already partly detached from the middle of the place where you want to be....

56. L: Yeah. Yeah, I don't see myself in the center. I see myself on the fringe.

57. R: Ideally you'd like to be back in the center.

57. L: Yeah....

58. R: I'm just thinking about that imagery....

58. L: When they used to tell us...when Bernie Siegel suggested ...trying to think of a cleansing image, and practicing that...several times a day, lying down and just going through this visualization. The thing that came to me was just picturing sunshine or bright white light flooding my body. I'm attracted to the light. I

don't like the dark, which may say something about my sleeping problem (she laughs).

59. R: Yeah, fear of the darkness....

59. L: But ah, I picture a very bright healing sunlight sort of place which is one reason why I enjoyed being in the Caribbean in the tropics so much, because it was so sunny and bright, and colorful. And that I see as a kind of healing happy image.

60. R: You know in some of the healing imagery work that some people do...for example, in my counseling experiences in California...was to do some imaging of God, as a light like that, who was showering your body with an intense white light. (During a change in tape, I proceeded to a discussion of the work of the Simonton's in Fort Worth.) For example in your case the Simontons's might invite you to have an image of a cancer cell, and then to imagine your body's defenses attacking that cell....

60. L: I never could get into that imagery, because that required you to assume and acknowledge that there was a cancer in you.

61. R: Right....

61. L: And at that point in my illness I consider myself to be cancer free. I'm not supposed to have a tumor anywhere right now. For me to picture myself having a tumor is negative, and that's upsetting. I prefer to just see that bright light....

62. R: Yes, perhaps at another time in your treatment that may have been more appropriate.
62. L: Yeah, I have not been at a point where I had a tumor that was not being taken out, but if I did, I imagine I would try those kinds of images about my body. I couldn't get into that. I'm not supposed to have any there.
63. R: I know one theory is that we all have at least potentially cancerous cells. Part of it is how well our bodies continue to function in suppressing it...that we're all walking around with potential cancer. I remember one cancer patient I visited when I was a senior at Duke, a man from my hometown who was dying with lung cancer.... I went in and visited with him and told him that I was ready to go off to seminary, and he decided to share his life story with me for about two hours. But one thing he said--and I've heard others say it--was that he said, "You know we're all terminal. Some of us happen to be fortunate enough to know it."
63. L: I don't know that I consider myself fortunate.
(she laughs)
64. R: I hear that! For you it has been the source of a lot of anxiety. And it's something you've had to live with.
64. L: Well, it's too soon. If I were 75 I think it would have been a different experience. When you're 32, and

you have a 3-year-old daughter that you love dearly,
you're not ready to accept your mortality.

65. R: And yet on the other hand I do hear you saying that
because you have had to wrestle with this--I mean
you've had no choice in the matter; it's just been
there--that you have made the most of it in certain
ways, and you have learned to value life and certain
things you find beautiful.

65. L: I would never, never say that cancer was a
blessing. If you're trying to get me to say that, I
will not....

66. R: No, I'm not....

66. L: I think I had pretty good values before I had the
cancer too. It's just intensified my yearning to be
surrounded by beautiful things, and to stay away from
hassles and pettiness. That...that yearning has been
intensified. Just not get involved in something that
doesn't matter. It's a waste of human energy. So I
don't let myself get involved in negative
things...gossip, or talking behind someone's back, any
kind of negative cause I stay out of. People don't
even actually try to involve me, I think.... People
tend to shield me from negative topics, which I don't
always appreciate actually....

67. R: You don't want to be protected unnecessarily....

67. L: Yeah. I want people to tell me what's going on
'cause I think that I have some creative energy left

that I think that I can help people solve their problems. So no, I don't want to be left out in that sense either. I want people to share their lives with me and their problems with me so I can help them. And a lot of times people don't tell me their problems, because they figure I have enough of my own. And I don't want that. I want to be involved in other people's lives.

68. R: They may fear that that might actually add more stress to your life, and that's the protection--that they don't want to add more stress to you.
68. L: It's the opposite, because if I'm thinking about someone else's issues, I'm not thinking about my own. Anything that gets me away from worrying about myself is good. It's not really an added stress. There have been some bad things that have happened in my family, in my parents' situation recently that...yes I have worried about and been very concerned about, but I'm glad I knew about . And I've tried to brainstorm some ideas to help out in that situation. It doesn't really make more stress on me to let me into somebody else's problems, because it allows me to focus on them instead of me...but that's what people think.
69. R: Ah...coming back again...in some ways just enjoying the image of the light that you talk about...and um, that combined with the image of your sometimes being left out.... I have a vision myself of a spotlight here

in the center, and sometimes you feel like you've been out on the periphery of light and help...that you really long to enjoy being back in the center with the light and the healing gifts, and to be able to shed some of that light into some other people's lives as well.

69. L: Yeah, I still feel like I have the potential to give to others, and I want very much to give to others. And um, I think some people may underestimate my ability to do that ...because they think it would be impossible or too stressful. But I have a great ability still to help others and care about others, and try to help them solve their problems.
70. R: How do you feel about yourself in terms of that, how fragile you are versus how strong you are? My sense about you is a person who has always had good ego strength and some pretty good coping abilities in the world as far as that goes....
70. L: Ahm, fragile or strong, that sort of depends on what part of me you're talking about. There's a very scared person inside of me when you're talking about some things. If you're talking about Linda the mother, I'm very strong. If you're talking about Linda the cancer patient, well, I've been a pretty good copper, but I'm pretty scared about what could happen. I did what I had to do, and feel pretty good about how I got

through it, but everything since then has been a struggle.

71. R: And how about in terms of Linda the person who can be involved in other people's lives?

71. L: Well, as I said, I think I still have great potential to be a good friend and helper. And I want those opportunities.... Sometimes I feel lonely. I don't have that many friends who involve me in their lives. My best friend that I used to have moved away. She was the one who shared all her ups and downs with me. And I really treasured that friendship, because she would share with me the bad stuff going on in her family, and uh not just the good stuff. Very few people are willing to share their bad stuff with me...um, I would like to have more close friends.

72. R: I appreciate your willingness to do this today, because I can imagine that this was kind of a threatening thing, for me to come and invite this conversation, huh?

72. L: Yeah, especially on the heels of this week when I had a psychiatrist's appointment, and an oncologist's appointment, and a fight with my husband. (she laughs) It wasn't a good week!

73. R: Yes.

73. L: But it's getting better.

74. R: I hope so.... I think that was one of the things that I felt tender about in inviting you to spend some

time talking with me like this, because it moved us a little bit out of a frame of friendship, put me in a little bit more objective position in asking you some questions about what's going on...and maybe opening up some stuff that you prefer not to have opened up right now. And yet on the other hand, I was wondering, well maybe, I hope this is something that will be a good conversation.

74. L: Well, you and I have a long history of trust, and friendship, and loyalty. I would tell you things that I wouldn't necessarily tell someone else....

Practical Theological Reflection

Linda's very articulate reflections on her experience with cancer, two surgeries, chemotherapy, and ongoing problems with anxiety and depression open to us a variety of points for theological concern. The links between the preliminary and the ultimate in this case are often quite close.

Early in the discussion Linda revealed that her primary fear (see numbers 9 and 10 above) was the fear of death. "I was really afraid of not existing any more. Death to me meant that I would be completely taken away from my family, and especially my little girl." For Linda the threat of separation by death from those she loved was a very real and present threat.

A very close link probably exists between the threat of separation and the experiences of alienation and loneliness. In a sadly ironic way Linda's fear gets played out symbolically in a self-fulfilling prophecy. Even though she has not met her actual physical death, death seems to abide with her in the form of this "evil invader" (see #12L). Her depression and anxiety serve to cut her off from others anyway.

In item #55 she describes a drawing she did about her situation in a workshop on healing visualization. In her family drawing, she noticed afterward, she had placed herself in the background, out of the center of the action. "So it's kind of like a detachment," she said. "The cancer experience pulls you away from your loved ones and from the things you enjoy in life for a while. And you fear that it's going to pull you further away. You see yourself sometimes as being left out."

For Linda, the fear of separation in some ways actually contributes to a here and now separation. Her depression about cancer and death leads her into a kind of here and now death in which she finds herself observing life from the periphery, playing out her role in the background of her family and social systems.

Separation and loneliness also were expressed in her description of the way her family and friends tend to protect her and "shield (her) from negative topics" (see #66L above). She has very few friends who will dare to

share with her the "bad stuff" in their lives. The one female friend who was particularly good about that kind of sharing with her has moved away. She longs to be invited in to help with other people's problems, to be able to invest herself in the center of someone else's hurt or need.

Yet she also tended to shield herself from what she considers to be negative and wasteful activities. She doesn't involve herself in gossip and negative talk, and she tends to keep her distance from things she doesn't like or doesn't want to do. While she sees these choices as clear, positive, and healthy choices she may also be separating herself from other people and therefore adding to her loneliness by making such choices.

She comprehends the fact that her experience has changed her perspective on the world, that she has a sharper vision of, or sensitivity to, the tragic and the beautiful, and that perhaps she is more in touch with these realities than most of the rest of the world. While the rest of the world lives in a relative denial of death, she lives with the sharp edge of death and often sees life from the perspective of imminent death.

Also she expresses a grief about separation from herself. She is no longer the woman that she was, no longer the person that her husband married. Perhaps she is even saying that she fears that she is no longer herself...not the person that she has known herself to be over the years. So it is as if a part of herself has already died in this

process, and yet she is still alive to grieve over the loss with everyone else.

The connection between her fear of death by cancer and the kind of pseudodeath she has already experienced through her depression and anxiety seems to be very strong. The "normal" life that she longs to return to is unavailable to her. She already feels forever separated and cut off from that old reality, from the dreams and the hopeful visions which once guided her. She even feels cut off from the career for which she had trained and prepared herself academically.

James Dittes in his book Minister on the Spot reviews the story of the paralyzed man at the pool at Bethzatha (John 5:1-15) who had lain by the edge of the pool eight years waiting for healing to happen.¹ Legend tells, according to some authorities, that an angel of the Lord would occasionally stir the waters of that pool, and that whoever next stepped into those waters would be healed. This particular man complained to Jesus that he never had help to get into the pool at the right time, that someone was always getting in before him, so that he remained stuck there in his paralysis.

Dittes describes how this pool for this man represents life and health.² He is so close, and yet so far away.

¹James E. Dittes, Minister on the Spot (Philadelphia: Pilgrim Press, 1972), 1-9.

²Ibid.

Over there is life. Over there is healing. Over there things are happening. Yet here he is stuck on the periphery, stuck in his illness, his paralysis. He has spent 38 years on the verge of real life, never quite knowing how to take the plunge into the midst of it.

Linda's images of living in the background, or along the outer edges of life rather than in the center of it bears some analogy to the story of the paralytic. She longs to be in the center of life, in the middle of the action, but she doesn't know quite how to get herself there. She feels left out and discouraged. She needs someone to come along and open the door to health. She resents it when people grow impatient with her paralysis of the spirit-- which is something of what depression is. She also resents it when they treat her differently and leave her out. She feels caught in a bind. She has sought the aid of many physicians and healers. Some have been able to relieve her symptoms, but none has been able to release her from the bind of death.

The bind of death is real. It does not go away. In the meantime she is already in a kind of purgatory, somewhere on the edge of death, and also on the edge of life.

Occasionally something lively stirs within her when we talk about anger. "Everybody tries to assume that I'm angry," she says with anger in her voice, "and that I have all this repressed anger...and I may, but I'm so busy trying

to cope day to day, and I have realities of day to day life to deal with" (see #24L above). Anger does seem to play a significant part in her life. The focus of the anger is obscure, but it often gets dumped on the persons with whom she is most intimate, especially her husband. Certainly she is angry about her deprivations, and her being on the periphery of life.

She is also angry about the unfairness of her disease. Breast cancer isn't supposed to happen to 32-year-old women. The average age, she says, for breast cancer is 57. Therefore she has been robbed of 25 good years. Whether or not that is logical, that is how she feels (see #23L above). It isn't supposed to happen this way.

While she did not state the matter directly, she is also angry with physicians who have made her promises which she couldn't trust. After her first surgery her doctor declared that she was 98 percent cured and that he had never seen a recurrence of cancer in someone in her situation. Therefore when a recurrence did happen, it was a double blow. It wasn't supposed to happen. She was supposed to be cured.

The recurrence served to reinforce her fears and to undermine all the assurances of her doctor. She could not help being angry when he was wrong, especially when he was wrong to her disadvantage. She lost trust, therefore, in the assurances of many helpers even though she continued to look for their help and assurance.

While we did not discuss the issue directly, her anger could also focus on anger with God as well. God is a rather intangible target, and it is difficult for her to find something more tangible to express her anger and frustration about the unfairness and sadness of her situation. Some psychotherapists from a Freudian point of view would say that her depression is anger turned in upon herself, anger with no socially appropriate outlet for expression.

She also struggles with anger which seems to be unjustly aimed at her. Primarily she is hurt when her husband or her mother-in-law loses patience with her and tells her that she should be getting this thing behind her and getting on with her life. She feels that she is getting anger from them when she needs support and understanding. This often only drives her deeper into her depression, indicating that there potentially are some connections between her anger and her depression. The theological link here may be to the idea that if her cancer is a cosmic form of anger or punishment being taken out on her, then she has been unjustly selected and hurt. Again there seems to be a lack of appropriate outlet for this kind of anger, if it is in fact a part of her feelings. Even if the anger is not there, her social alienation may be linked by analogy to metaphysical structures of alienation. Her primary anger and depression nonetheless open the door to a discussion about what recourse we humans have in the face of life's tragedies and injustices.

Part of the anger directed at Linda from others has to do with impatience about her lingering at life's sidelines. In the case of the paralytic at the Bethzatha Pool, Jesus' first question was, "Do you want to be made well?" (John 5:6). By analogy is it appropriate to question whether Linda really wants to be healed or made well? Is she getting a great deal of secondary gain out of being sick or emotionally disabled? How much of this is in her mind? How much could be changed if she had more faith or another attitude? How much is her responsibility?

On the other hand, Linda's cancer experience is very real, and her reading and learning have taught her that she may never be totally free of cancer cells in her body, that she will have to be always vigilant and prepared for the next struggle. The fact that she is haunted by cancer and by death is something that tends to haunt all those who come in contact with her. Most of us are used to living and functioning at a certain level of denial of death. Linda's approach to her illness and experience tends to break through that denial. It only seems to make sense that to whatever degree Linda brings to us preliminary symbolic connections to the ultimate reality of death that many people would tend to react to her with varieties of denial, anger, or avoidance.

Her depression is symbolically linked to death and tragedy in our existence. It is a painful symbol to face. It is not unusual for people to get angry with the messenger

when they don't like the message. The tragic side of Linda's story is not one with which most any person would want to live. My own communication with Linda revealed attempts to put a positive frame on at least part of her experience. I would have liked for her to rewrite her story and give it a happy ending or at least some redemptive noble meaning. She was quick to spot any attempt on my part to reframe the story (see #65L): "I would never, never say that cancer was a blessing...if you're trying to get me to say that, I will not."

There is nothing redemptive about the evil in our world. Evil is nothing but a curse upon our individual lives and upon humanity as a whole. Don't try to dress it up. Don't try to rationalize and make it look pretty. It is an ugly and dark reality which we have to face and endure. That, I believe, is what Linda was saying. Certainly one of the basic doctrines of Christianity has to do with evil, sin, and the basic corruption of God's creation. Christianity rarely focuses on the denial or avoidance of evil, but upon the confession of its reality, even within ourselves, and the need for us to cast ourselves upon the grace and redeeming love of God in response; that is, the need for us to recognize our whole dependence ultimately upon God for our salvation.

Part of our human denial of death, therefore, also involves our denial of our need for God and our need for the gift of salvation. The Christian way toward hope and

wholeness calls for breaking through such denial, or what Reinhold Niebuhr called "pride," as one of the two basic human preconditions of sin.³

Linda's own breakthrough in living beyond such denial, while it has led her into tragic anxiety and depression, may yet prove to be an important part of her spiritual journey toward hearing and receiving the Christian Gospel of salvation. She already knows in her own experience what it is like to contend with a world in which persons do not want to face their own pain and tragedy.

Her hunger for medical help and healing has already at many points connected her with her hunger for salvation. With her sharpened perspective she has already found herself changing her values, resisting the negatives more strongly, and saying "no" to those things which she sees as a waste of her time. She is far less inclined to accept the world and its worldliness, its consumerism, its peer pressures, its judgements about success and power. All that appears extremely empty to her. Whether or not she realizes it, she is echoing the messages of Paul and the values of early Christian communities when she makes such statements. She is already connecting herself to the higher values of Christian spiritual wisdom. She is accepting Jesus' imperative not to lay up treasures on earth where moth and rust destroy and thieves break in and steal, but rather to

³Reinhold Niebuhr, The Nature and Destiny of Man, vol. 1 (New York: Scribner's, 1941), 186-207.

lay up treasures in heaven. In her own search and appreciation for beauty, she is attempting to connect herself with heavenly treasure. Her newly deepened ethics not only have to do with aesthetic appreciation, but she also rails against human manipulation, corruption, and destruction of God's creation. Her vision of environmental concern (see #50L above) has symbolic and direct links to her hatred of cancer. Both her environmental vision and her battle with cancer provide images of struggle with a dark invader, a malevolent pollution of the world and of human bodies, spiritually, as well as bio-chemically. So again here are links by analogy with Christian concepts of sin and evil, and a quest to do battle and claim victory over the powers of darkness by way of a redeemer, a need to find reconciliation and an end to the powers of alienation and death.

Cancer itself is a disease which may in some ways inform human concepts of sin and corruption by way of analogy. Cancer invokes the image that all persons have within them potentially cancerous cells, the image that cancer really isn't an outside invader so much as it is a perversion of the human organism, a perversion of healthy structures of existence as God created them.

When cancer happens it is something within a person that goes wrong. It may be set off by a number of environmental issues, but ultimately cancer happens when human defenses and systems of protection fail. A

malevolence occurs from an inappropriate kind of growth, growth without purpose, or function, or order, cellular growth that goes wild.

When people understand that this is what cancer is, they gain a new appreciation for the miracle of order and health, the remarkable image that the earth and the whole cosmos appear as an ordered creation rather than rambling chaos. Cancer in many ways appears as the antithesis of creation, order perverted into chaotic and monstrous growth.

It appears that much cancer is directly related to human manipulations of the environment, manipulations which sometimes are symbolic of human attempts to "play God" with the world and with humanity itself. Cancer is in many ways a real-life Frankenstein monster loose in the world. It provides a powerful archetype for sin and evil.

For Linda this archetype provides lingering, haunting images of danger in her own body. It does not go away. How can she respond to this insidious, pernicious disease--this sneaking suspicion that all is not well, and never again will be? Her encounter with cancer remains dimly, if not overtly, present, threatening her existence, threatening to come out again and make life miserable for her.

At times the link from her cancer to more ominous spiritual realities of darkness seems rather direct and perhaps even more than symbolic. So where is the Gospel in this? How does the Christian Gospel speak to her situation? What is the pastoral response to the darkness here?

Pastors often use symbols of Christ's victory over the powers of sin and death, yet these symbols do not quiet anxiety about the threat of separation and grief. Even Paul in Romans 7 recognizes the paradox of a life lived between the "already" and the "not yet" in God's promise of salvation, that victory was won for humanity at the cross of Christ, and that all persons bear the first fruits of that victory; yet sin is still a part of human nature and often dominates human behavior.

Perhaps the Christian concept of sanctification and growth in response to God's grace is an important structure here. Linda reports that she has found helpful, healing imagery through simple visions of light, light that pierces and dispels the darkness. "The thing that came to me," she says, "was just picturing sunshine or bright white light flooding my body. I'm attracted to the light. I don't like the dark, which may say something about my sleeping problem. But ah, I picture a very bright healing sunlight..." (see #58L and #59L).

Of course, the Bible and most all religious literature include basic images of light overcoming darkness. It is one of the most universal archetypes for symbolizing the victory of good or of God over evil. Specifically in the prologue and elsewhere in John's gospel, the light is Christological: "The true light which enlightens everyone, was coming into the world" (John 1:9). "And this is the judgment, that the light has come into the world, and people

loved darkness rather than light because their deeds were evil. For all who do evil hate the light and do not come to the light, so that their deeds may not be exposed. But those who do what is true come to the light, so that it may be clearly seen that their deeds have been done in God" (John 3:19-21).

So Linda's description of an image of healing light in her life can be the point of symbolic linkage to other Christological images, language, and events in her life. Does this light symbolize a Christ who can redeem her from the darkness of the night and from the dark invader of cancer itself? There are moments of light and hope for her which seem to lift the oppressiveness of her depression.

During last year's vacation to Puerto Rico, for example, she discovered such remarkable beauty in the flowers of the rain forests that she found there a symbolic foretaste of heaven or paradise: "I thought...well, for a moment, I thought, I'm not afraid to die anymore because this is paradise, and I would love to be in a place like this. You know, this could be what heaven is like" (see #51L). The simple analogy for her was remarkably clear and liberating. God's creation still reflects the beauty of God's love and will. Life can still be redeemed toward something abundant and wonderful. Death does not have to have the last word, nor the ruling power in life. For her it was only a glimpse, and the feeling lasted for only a moment, but it did appear nonetheless to offer a lingering

connection to a more ultimate experience of redemption and salvation. She has experienced a preliminary concrete foretaste of the banquet table of heaven. For her the rain forest was a sacrament which imparted here and now means of grace and hope.

Analysis of Method

The experiment which was conducted with Linda involved shaping the conversation, especially at the end, to evoke images and spiritual reflections which might particularly provide good material for brainstorming about analogies to more ultimate theological structures, Biblical stories and images, and simple points of linkage between preliminary structures of life and ultimate structures of meaning and reality.

In reflection upon the conversation itself, I probably missed some opportunities to follow a longer line of thought on some images or analogies. Still, what came forth was very rich and meaningful. Particularly her open discussion of the image of seeing herself in the background or on the periphery of life and her lonely feelings of being left out or alienated were especially poignant and open to many symbolic connections and interpretations.

Her images about healing sunlight brought out one of the few brighter moments in the midst of a fairly sad and painful account of her medical and treatment history. There was, for example, a quick insight on her own part that her love of light and her fear of darkness could have some

connection to her sleeping problems. The night is an ominous time for her, while sunlight symbolizes hope and healing.

I cannot say that in one conversation we went very far with these theological reflections and connections, but I think we can say that we discovered several clear openings in which Daniel Day Williams' principle of linkage⁴ could be engaged. A few of these have been discussed above. Based on my experience in what could be "mined" with her in one session, I believe this theological method could create rich possibilities for ongoing discussion in a process of pastoral counseling. My own experience of therapy reveals that certain structures, images, or archetypes become key-notes for therapeutic process. My first goal here is simply to find a helpful method toward practical theological reflection in pastoral care and counseling. If that reflection yields images or structures which contribute to the ongoing therapeutic process, that, of course, is to be welcomed. In such instances Williams' concept of the principle of linkage⁵ would be especially well validated.

I consider the work of this particular interview with Linda to be successful in terms of the goals of this chapter and this dissertation. As one example it offers a foretaste of the many possibilities for experimentation in method

⁴Williams, The Minister and the Care of Souls, 26-29.

⁵Ibid.

toward the actual fulfillment of Williams' approach to practical theology.

Implications for Pastoral Practice

Perhaps the most powerful entities in this case study are the entities of disease and death. By analogical connection from the individual to the universal, the primary theological images and issues here are eschatological.

The problems of death and dying are among the most critical problems of humanity. By analogy, the death or the impending death of an individual is connected to the ultimate death of all life--the end of history.

One of the principle problems for pastoral practice in the face of death is the proclamation and incarnation of the Gospel. Daniel Day Williams in one of his unpublished lectures on eschatology indicates that the primary theological issue of eschatology is the issue of hope:

Man is the being who hopes, and the Christian faith has given a particular name and contour to the hope by which we live in faith. The kingdom of God, the victory of Christ over sin and death, our transformation into Christ's image, eternal life; these are the Christian symbols of ultimate hope. And the Christian hope has had its other side; evil judged and overcome, justice done, a proper destiny for the righteous, and for the unrighteous, heaven and hell; death, the last enemy destroyed, and God all in all.⁶

⁶Daniel Day Williams. "Eschatology." From the last in a series of four lectures delivered at Princeton Theological Seminary during the autumn semester of 1971. This lecture was delivered December 9, 1971, and transcribed from audio tape. The taping was done by Wayne R. Whitelock. The transcription was done at the request of Seward Hiltner,

The problem of pastoral practice in the face of death is a problem of mediating hope. The symbols of hope which Williams mentions above do not necessarily convey an encounter with hope to persons at the level of their existential struggles. An abstraction about hope may not necessarily convey hope unless a method of analogy brings an ultimate structure of hope into direct linkage with an immediate personal experience of hope.

A method of correlation includes a search for the answers to the need. A method of analogy does not necessarily offer answers or even reassuring symbols. A method of analogy in pastoral care, however, does enable the connection and communication of a significant developing relationship between diverse entities. It is a method which by its essential nature breaks down alienation and a human feeling of being lost. The search itself then may yield hope, if not answers.

In the case above, Linda's image of herself as the one on the periphery of family and life is in itself an entity (a symbolic drawing) which by analogy enables her to get a perceptual grasp of a part of her experience which is troublesome to her. The drawing is not the experience

shortly after the death of Williams, and was dated April 9, 1974. The copy quoted is found among the personal files of papers of Daniel Day Williams located at the Center for Process Studies of the School of Theology at Claremont, California. This citation is from page 1 of the transcription.

itself, but the connection between the experience and the drawing is significant.

Drawing, therefore, could be a tool for pastoral care. What other experiences in her life seem to fit with this drawing? How does this drawing connect with her feeling about God and her relationship with God? What would it feel like for her to move herself within the drawing? What would it take for her to be able to make such a move? Could God help her to do that if that's what she wants? Can she dare to ask God to help? Can she dare to ask others to help? After reviewing the long litany of resources which have failed her, would it be too risky to consider that she may yet find structures and symbols and resources of hope alive within her that could help her to move?

Even more fearsome to her than death itself is a monster named cancer--a dark, literally malignant force, which looms constantly over her, casting her whole life into shadows.

Williams says that the question of eschatology is the question of "the security of faith in the ultimate victory of God."⁷

A person such as Linda, who has encountered the tragedy of fear and anxiety fulfilled, needs generous and constant positive reinforcement from sources beyond her: experiences of life which are consciously structured by analogy to convey hope. When a congregation surrounds an individual

⁷Ibid., 2.

with simple acts of unconditional love, the analogous nature of God's unconditional love and grace may break through an individual's defenses to a new opening for hope and healing.

Personal resistance to things experienced as painful or evil often gets translated into a global personal resistance to life. To restore the basic trust of a person who has been traumatized by brutal life experiences is no simple matter. If a pastor begins with a person at his or her easiest place of trust or faith--e.g. trust in a friend, trust in logic, trust in gravity--then perhaps from there new connections of trust can be developed toward an ultimate trust in the goodness and the victory of God.

Slowly, perhaps, one can be encouraged in small steps to discover that while there are evil things in life which can not be trusted, there is still something wondrously redemptive and loving in the overall process of life which can be trusted, and is worth trusting, not only for the sake of one's own salvation, but for the salvation of others, and ultimately of the world.

CHAPTER 6

Analysis and Conclusion

Daniel Day Williams in his work, The Minister and the Care of Souls,¹ has established the theoretical foundations for a method of doing Practical Theology in pastoral care and counseling case study analysis. This work supports that assertion with a description and demonstration of such a method for doing theological reflection in the context of case study analysis.

The model proposed in the introduction and demonstrated in succeeding chapters is grounded in an empirical approach to theology as advocated by Williams. While such an empirical approach is not recognized or supported by the entire theological community, it is sufficiently argued in the tradition of process theology as an appropriate method of academic inquiry.

Daniel Day Williams' own approach to empirical theology was highly theoretical. In his works he gave only glimpses of the practical implications of his theories. In The Minister and the Care of Souls, Williams attempted to address his theology to the practical concerns of pastoral care and counseling. In this volume he set forth an approach which Don

¹Williams, The Minister and the Care of Souls.

Browning² and others have labeled as "analogical." Analogy in thought processes is taken to be one of the most rudimentary aspects of the human assimilation of experience and knowledge. Analogies are in effect the road maps people use to understand, engage, and structure reality.

In his discussion of the "Principle of 'Linkage'"³ Williams asserts that theological and psychological significance may be discerned in the process of following an analogy from concrete immediate events toward higher structures of abstraction and concepts of ultimate reality.

Williams' empirical theological assertions appear in chapters 3, 4 and 5 in the form of a relatively simple method for theological reflection in case study analysis. The implied assertion is that this method may have practical applications in the process of counseling itself, but the focus of this work is confined to the problem of case study analysis.

The heart of this method lies in brainstorming images and analogies which are called forth by certain events in ministry. In effect this could almost be reduced to something like free association, but the demonstrations presented here involved concentrated conscious thought and personal selectivity.

Questions could arise following the brainstorming process regarding an appropriate method or set of criteria for

²Browning, "Analogy, Symbol, and Pastoral Theology," 41-54.

³Williams, The Minister and the Care of Souls, 26-29.

selecting certain analogies for further theological reflection. In general the process of analysis should be productive even if the method of selection is very arbitrary. The operative theoretical principle is that any part offers points of linkage to the greater whole. Depending on the context of the situation, an analogy could be selected on the basis of its potent ethical implications; on the basis of its apparent shock value in stimulating discussion and emotional response; on the basis of its familiarity or usefulness as a symbolic tool in pastoral practice.

Most likely subconscious factors will be involved in the process of selection as well, the nature of which may be revealed as the discussion develops. Therefore, it may also be helpful to pay attention to analogies which were initially avoided or intentionally not selected.

For those who look for specific criteria of selection, four concepts of the function of analogy as described in the first chapter above may provide helpful guidelines. To stimulate the selection process each of the following sets of questions may be useful.

First, how does the analogy highlight similarities and contrasts between the structures involved? What do the strengths and inadequacies of the analogy reveal?

Second, does the analogy provide for creative conjecture? Particularly if one structure is more familiar or concrete (such as an immediate experience) and the other is more abstract and speculative in nature (such as God), does the

analogy offer helpful conceptualization of the more abstract or ultimate structure?

Third, how does the analogy function in terms of symbolic relationship instead of in terms of cause and effect relationships? Does the analogy help mediate one reality to another? May the analogy function in some sacramental way mediating God, grace, love, salvation?

Fourth, does the analogy enhance or reframe personal road maps of reality? Can it make a helpful difference in how persons operate in their lives? In other words, does the analogy enable desired cognitive and/or behavioral adjustment? Does the analogy offer new insight for the conduct of pastoral practice?

The overall process of brainstorming about analogies, selecting analogies, developing theological reflections, and impacting pastoral practice with such analogies is inevitably very open-ended and personal. Such a process on the surface may appear to be highly subjective and unscientific, but even in the midst of such subjectivity Williams suggests the existence of significant points of linkage which may lead us empirically toward structures of theological meaning.⁴

Williams suggests that a second mode of linkage or relationship exists beyond the scientific mode of cause and effect.⁵ That second mode, he says, has to do with the way "relationships between experiences are mediated by their

⁴Ibid.

⁵Ibid., 27.

function as symbols."⁶ As an example he states, "Loving devotion to a sick person becomes a sacrament of the spirit of God who cares for all."⁷

Williams' concept here can be expanded to consider that this whole symbolic mode of relationships may be understood to be sacramental. The operating premise is that immediate structures of reality inform human beings about the ultimate structures, that there is a link between a person's experiences in the world and the realities of God.

The purpose here has not been to prove this premise in any absolute sense, but rather to demonstrate its viability and qualitative value as a theoretical foundation for doing practical theology in case study analysis.

The particular approach to practical theology suggested by Williams' work is empirical inasmuch as the process begins with the data of human experience and follows the symbols and structures of meaning which the data might suggest. As indicated in the introduction, this provides a significantly different method for practical theology from that of an applied theology; that is, a practical theology which moves from logical theoretical deductions toward testing or applying them in practice. With the Williams model, one can move from praxis to theology, rather than from theology to praxis.

In his discussion of the foundations of practical theology, David Tracy suggests that all human experience, all

⁶Ibid., 23.

⁷Ibid., 27.

praxis is theory laden.⁸ In other words no pure praxis exists without theory. Our theoretical structures of reality are constantly informing and shaping our experiences of reality. One, therefore, does not simply move from praxis to theory or from theory to praxis. The two are inevitably entangled.

The processes involved in the analogical model of practical theology are not necessarily free of presuppositions or bias. In the case of pastoral care supervision and theological reflection, the person of the counselor or pastor is primarily involved in structuring and interpreting the events of ministry, even in "non-directive" Rogerian counseling. In a similar manner, the counselee or care-receiver is primarily involved in structuring his or her own experience. The processes of psychological and theological reflection therefore are always at least somewhat subjective, personal, and self-revealing.

The process of analogical association and brainstorming is therefore in many respects subjective, personal, and self-revealing. The process is consciously and unconsciously biased. Such bias, however, once acknowledged, merely becomes more data from which to draw symbols, analogies, and reflection. Therefore, such personal subjectivity is not necessarily a problem for this proposed model. The data of such personal subjectivity here function much as a Rorschach test. In the process of reflection the counselor or pastor

⁸David Tracy, "The Foundations of Practical Theology," Practical Theology, ed. Don S. Browning (San Francisco: Harper & Row, 1983), 61-63.

begins to build analogies from immediate experience toward abstractions and symbols which may be revealing of ultimate realities in general and of God in particular.

One way to dilute personal bias or subjectivity with this model would be to subject it to group process. In a group case study conference, for example, the theological reflection process could begin with group brainstorming about theological symbols, images, Bible stories, myths, and contemporary cultural archetypes and icons which bear association by analogy to some aspect of the events or situations being reviewed. The group could develop a list of these images and analogies--as we did for the verbatim case study in chapter three--and then select certain ones for further reflection and elaboration. (See principles of selection above.) A named observer within the group might then reflect further on the dynamics of the group process and any links between the structure of this process and the symbols or analogies discussed. Finally, the process could involve discussion of the implications from these theological reflections for further action in the case and for personal discipleship or spiritual growth in general.

Chapters 3, 4 and 5 include demonstrations of this model in individual cases. Chapter 3 includes discussion of the model with a verbatim and case study from an event in hospital chaplaincy. Chapter 4 contains discussion of the potential of this model with an extensive family of origin study. Finally, chapter 5 includes a significant case study interview which involves some initial reflection by the interviewee (Linda),

and provides foundation for further reflection employing the analogical method.

In chapter 3 the case study regarding the crises of premature birth provides rich material for analogy and theological brainstorming. From analogies to the birth of Christ and the crucifixion of Christ to the relationship between mother-infant bonding and God-human bonding the theological images can be very stimulating to the imagination. While much value can come from taking some of these images to elaborate upon them in logical deductive analysis, the sheer plethora of images and analogies indicates that something is powerfully creative and intuitive about this simple method in regard to the stimulation of creativity and new discovery. Simply to draw a connection between the image of a suffering infant and the suffering Christ not only promotes theological reflection, but also, religious experience. The quest for such connections, relationships, or analogies is like a religious quest, or a religious act. It is an invitation to consider that superficial images and experiences provide potential openings to tremendous depths of human and divine reality.

Once one begins to examine common occurrences and events in this light, he or she begins to see theological pearls everywhere within the daily drama of life. In this particular instance the innocent suffering of a premature infant in his ICU crib was very provocative. His mother struggled with many emotions: joy that the child had been born; compassion and pain regarding his pain; anxiety about his chances of

survival; grief over temporary separations and the long distance between the hospital and her home and guilt about anything she may have done to cause his suffering.

Little meaning seems apparent in this child's suffering until one begins to see it in analogy to Christ's suffering. The suffering of the innocent and the ways in which sin is visited upon them provokes compassion and sorrow and repentance. Before the awesome sight of a suffering new life, this mother encountered the power of God. She met God particularly in her helplessness and in her remorse about her life.

In that same situation, the mother also became Christlike, offering to give her own life that her child might live. Even though she was young by contemporary standards, she felt that she had lived enough of life, and that she was ready to let it go.

No fully satisfying answers explain why this infant and his mother suffered. No scientific formula, no psychological theory of cause and effect can render any truly definitive answer about why this suffering happened. The simple linkage, however, by analogy between this moment of human suffering and the suffering of Christ on the Cross opens a meaningful relationship of a theological nature between two structures of experience and reality. By juxtaposing the two moments or images in one's mind, a person begins to see, to recognize the analogy. By analogy he or she begins to find meaning in suffering and hope for relief.

The introduction of this analogical mode of relationship does not change the pain and the suffering of a human being, but it does offer a connection to structures of meaning and reality. Thus, the suffering is given a context in relationship with structures of higher reality--ultimate reality--God. In this context the suffering itself becomes a doorway or a passage toward the experience and the knowledge of God. No one can answer why the baby suffered, but he or she can say that his suffering may have opened a link to God and to the nature of Christ in the world, not only for his mother but for many others of us who encountered him.

Daniel Day Williams states the matter of Christ's suffering as a crucial disclosure of God in relationship with our humanity:

The suffering of Jesus is the human expression of God's own suffering for us. It is meaningless then to speak of Christ's suffering as an appeasement of God. It is rather the authentic disclosure of God's will to stand by us, his creatures, and offer a new life we do not deserve. Love does not seek suffering, but it takes necessary suffering into itself and uses it in the very work of reconciliation.

When we speak of Christ's suffering as a disclosure of the spirit of God, we go beyond what any human experience can prove, but we find analogies in experience which become luminous in the life of faith. We can see why the New Testament asserts that we cannot know the love of God except as it is first given to us in our brokenness.⁹

What Williams implies above is that this practical theological method which we propose is not aimed toward proof of propositions or theories as in scientific method. We cannot

⁹Williams, The Minister and the Care of Souls, 90-91.

prove the ultimate structures which we imagine and articulate, but the analogies in our experience become "luminous of the life of faith."¹⁰

Williams says, "The pastor must be a theologian and the kind of practical theologian who can keep theological concepts in significant relation to human experience."¹¹

He adds that there are certain skills which are unique to the work of a practical theologian:

Man is spirit, and the spirit hungers for God. Man is created for fellowship, and his soul thirsts for the love which sustains, cares, and forgives. The theological skill which is required here is that which can go to the spiritual center of the mass of human feeling and anxiety. It is the capacity to hear and interpret the unarticulated longing of the spirit through the ordinary and the extraordinary language which people use.¹²

The nature of our theological method is to draw a linkage between immediate experience and the realities of God, to help persons see how the dynamics of their personal experience provide points of passage by analogy to higher structures of meaning and theological concepts. Ultimately such a method invites our personal experience of God, not so much through religiously ordained rituals, but rather through our reflective illumination of the nature of God in our common daily experience of life.

¹⁰Ibid.

¹¹Ibid.

¹²Ibid.

Daniel Day Williams definitely sees the practical theological task as a matter of opening up the relationship between a person and God:

The pastor's task is to open the way for the person to come to confess his real need for God. That means the pastor must be able to clarify the Christian understanding of man's relationship to God and yet intrude as little as possible when the other person reaches out toward God.¹³

The basic purpose of our method of analogy as we have demonstrated it in chapter three is to create an operating construct for revealing what Williams calls the "principle of linkage."¹⁴ This method provides a specific approach to doing practical theology in the analysis of pastoral care or counseling case studies. The method is simple, direct, and yet opens the way to complex theological reflection and speculation.

In chapter 4, a personal study on the minister's family of origin is the primary source of data. This particular study further demonstrates the analogical method and the principle of linkage as a means for theological reflection. This particular study was chosen, however, as a model for approaching the problem of the minister's self-knowledge, which is the title issue of Williams' fifth chapter in The Minister and the Care of Souls.¹⁵

Professionals among various psychological disciplines have learned the value of a counselor's own experience of

¹³Ibid., 105.

¹⁴Ibid., 26.

¹⁵Ibid., 95-121.

being a client in counseling and of undergoing significant personal therapy. The self-knowledge afforded by such experience enables the counselor or therapist to be more skillful and perceptive in using himself or herself in the therapeutic process with others.

Williams insists that such self-knowledge is crucial for the minister in his or her training and personal development. He asserts that there is an important place for psychology in the theological curriculum, partly as a means by which theological students may be enlightened about their own psychological problems and the interpersonal dynamics of their approaches to ministry.¹⁶

The family of origin project as presented in chapter 5 is an excellent instrument for achieving this goal of developing self-knowledge in the theological curriculum. It is the kind of project which can be done in the context of a semester course, and is especially relevant to studies of family systems theories of therapy. This tool or instrument provides an excellent source for research not only into psychological self-knowledge but into theological self-knowledge.

In particular the relationship between the experience of one's parents and one's experience of God is usually highly analogous and significant. For example, all families may be rated on scales of cohesion and adaptability. On the scale of cohesion, families run the gamut from enmeshed to disengaged.

¹⁶Ibid., 117.

On the scale of adaptability, families vary from rigid to chaotic. One could therefore expect that a person's concepts of, and relationship with, God would be influenced by the levels of cohesion and adaptability in his or her family of origin.

In my personal experience, as outlined in the family of origin study and my reflection upon it, enmeshment with my father raised a conflict between my need to separate and gain independence and my desire yet to be close to him. I have seen parallel dynamics in my relationship with God and in my early approach-avoidance struggles about being in or out of the ordained ministry. The tie between the relative balance of power in the marital dyad and my attitude toward a balance in male and female images of God is another example of linkage between family of origin and God concepts.

The possibilities for self-discovery in such a family of origin project is practically limitless. What this particular project helped me to do in the context of this larger work was to do significant theological reflection about the structures and dynamics of my family and their bearing on higher truths in my life.

Finally, chapter 5 involves the next step of introducing the theological method of analogy into a pastoral care interview. Even though the concepts of this model were not discussed in advance of the interview with Linda, this attempt was remarkably successful. At the time I preferred not to bias the results with too much of my own conceptualization

about analogies and images, but her own analogies and perceptions of linkage were highly illuminating.

The process of doing a lengthy case history interview is frequently an important process at the beginning of counseling. In this particular chapter, the transition to doing a practical theological reflection with another person on her own history leads to creative dialogue.

Linda's very open self-revelation in this interview provided rich material for theological reflection and provided images which may be relevant to many persons who deal with cancer, death, and depression. Particularly her image of herself as being out of the center of life and action presented a painful expression of her struggle with a feeling of living death. She is like the man at the Bethzatha pool: on the verge of healing and wholeness and yet disappointingly paralyzed in her quest.

Her reflections about life and its meaning for her now were remarkably articulate and lucid. The power of death and depression, and the persistent images of cancer in her body have powerfully influenced her perspective and her values. A direct link seems to exist between her experience and the values by which she chooses now, for example, to focus her limited energies. She focuses on things which are beautiful or joyful, and she tries not to waste her energies on the negatives. Her sense of the precious beauty of a single flower or of a bird singing is linked to her large sense of the preciousness of God's creation and the whole gift of life. In the way she has struggled against a deathly pollution of

her body by cancer, by analogy she struggles now against the deathly pollutions of the earth in general. In the way in which she has been sensitive to pain and tragedy in her own life, she is by analogy sensitive to larger tragedies in the daily news of human affairs. She feels the pain of war and violence, and feels herself linked to such events by her own experience.

The principle of linkage as Williams describes it is very evident in Linda's interview. She demonstrates that her personal experience has connected her in sensitivity to larger structures of experience. Even though she does not consider herself to be a theological thinker, she is very much concerned about ultimate issues and realities beyond herself, and finds herself struggling for a meaningful place among those realities.

This history-taking interview contained in chapter 5 provided good data for introducing the practical theological method which is proposed in this work. Any review of a personal or case history is likely to provide good material for this kind of practical theological work. As stories and themes in case studies begin to coalesce for a person around certain images, he or she may already begin to open doors or links toward theological reflection and religious experience.

Theological Postscripts and Proposals for Pastoral Care and Counseling

In his analysis of the human condition Daniel Day Williams speculates that the primary drive or motivating quest

among human beings is the "will to belong."¹⁷ Williams postulates that persons have an essential need to belong, to be in communion with God and with a community of other human beings, a community which the church attempts to incarnate.

This new community represents hope and salvation in human life, a meaningful social context in which healing and wholeness can take place. For Williams a great structure of meaning and purpose in life can be found in one's sense of belonging. Williams notes that salvation can be defined as

fulfillment for man in a new relationship to God and his neighbor in which the threats of death, of meaninglessness, of unresolved guilt, are overcome. To be saved is to know that one's life belongs with God and has a fulfillment in him for eternity.¹⁸

Therefore, it would seem to follow that where such belonging can be developed and/or communicated, an event of salvation and healing may be mediated.

In his discussion of analogy Williams recognizes something he calls the "community of analogous structures."¹⁹ In other words, by principle of linkage, analogous structures in one way or another belong to one another and contribute to the meaning of each other. The observation offered in the analysis of the case studies above is that the use of analogical method in theological reflection not only opens new insights and conceptualizations of reality, it serves to mediate a human experience of linkage. Such linkage provides

¹⁷Daniel Day Williams, The Spirit and the Forms of Love (New York: Harper & Row, 1968), 146.

¹⁸Williams, The Minister and the Care of Souls, 13.

¹⁹Williams, "Suffering and Being," 191.

a sense of community, no matter how primitive, breaks down alienation and the concomitant anxiety associated with alienation, and therefore mediates at least a partial experience of healing and salvation--a foretaste of fulfillment and wholeness.

In Linda's case study in chapter 5, her drawing revealed an image and a feeling of being left out. Almost immediately she made the analogous connection between the immediate structure of feeling left out on the edge of community and the more ultimate structure of death. She says that death is for her the ultimate form of being left out. She fears that death literally means excommunication, an ultimate separation from those to whom she wishes to belong.

For Williams Linda's fear of being left out or not belonging is her most essential anxiety about meaning and purpose in life. Perhaps her depression is rooted in her living experience of alienation, and tragically the depression itself only exacerbates the condition through the avoidance responses of others and her own inclinations at times to avoid human interaction. Linda seems to be seeking an assurance that she can and does belong with others, especially with her family, and in a more ultimate way with God. Her quest for genuine friendships and intimate involvements is a direct expression of her "will to belong."

In some of his own reflections about death, meaning, and salvation Williams says that a pastor has the ultimate resource of faith "which declares the participation of every life in the eternal purpose of God. Death can never destroy

the meaning of life."²⁰ The hope for meaning in life is found in one's belonging with God. This belonging is the essence of salvation which transcends all temporal conditions, even death.

If we begin here we can say that the root anxiety is that of "not-belonging," of not counting. Men are not afraid of not existing nearly so much as they are afraid of not being wanted. This is proved daily when death is risked, or even sought for the sake of a love, a loyalty or a protest. Here then we make one qualification of Tillich's doctrine that matters of ultimate concern are those which determine our being or our non-being. When we ask what really constitutes being for man the answer is that it is belonging, or communion which constitutes its heart.²¹

For Williams therefore a person's anxiety about death is also revealing of his or her life and the nature of one's sense of belonging with God and specific others.

There are those for whom the fear of death is the constant overtone of life. There are others who want to die, perhaps to escape intolerable suffering, perhaps to relieve others of care. Sometimes it is to take revenge upon others. There are those for whom death is regarded as a natural experience and accepted without either regret or support from religious belief; and others for whom death is a door opened upon a new adventure of life with God. This very diversity of response supports the view that for every person the way in which he understands death reflects in part his unique biography....Death is known as a threat because we do not have trust and love which God intends for his creatures. When we meet death with anxiety, or with a sense of meaninglessness, we reveal our way of life, not only our concept of dying. It follows that the pastoral task is to help us to recognize what our attitudes toward death mean....Keeping in mind the principle of linkage, we see how anxiety about death may be bound up with unresolved questions about the meaning of life.²²

²⁰Williams, The Minister and the Care of Souls, 138.

²¹Williams, The Spirit and the Forms of Love, 146.

²²Williams, The Minister and the Care of Souls, 138-39.

Much of what Linda perceives and describes in her struggles with cancer, depression, and the threat of death confirms Williams' observations here. Through his experience with analogous structures in the human experience it would appear that he knows her and is in some symbolic way in community with her even though his own death preceded her ordeals by many years.

Unresolved questions about the meaning of life may be expressed in the form of a search for meaningful analogies, the search to put the structures and events of one's life in the perspective of connection to or communion with ultimate structures, to find a way in which the immediate structures of one's life belong to and participate in a community of analogous structures.

Thus, the process of brainstorming and reflection about analogous structures and their linkage to one another may be far more than an academic exercise in theological articulation. Such a process may provide for the mediation of therapy, and sacramental mediations of God, community, and grace. The cognitive and experiential impact of such analogies on both conscious and unconscious levels may be very powerful for all persons who engage them.

The power of analogy to open links between immediate experiences of reality and ultimate structures of reality is a power to mediate meaning and belonging. The power of analogy is a power to refocus attention, to transform perceptions, attitudes, behaviors, and relationships. The power of analogy

may also in some instances be sacramental in mediating a communion of love between God and human beings and among human beings.

The power of analogy is the power to reframe something trivial as something meaningful and significant--to see common objects of reality as windows opening toward greater or ultimate structures of reality. For example, a table in a pastor's counseling room may at first appear to be a trivial common object. It seems so unimportant to the persons present that it is virtually ignored.

If a question is raised about the analogy between God and the table, an immediate concept of dissimilarity may at first block the process. Perhaps one could stretch his or her imagination to talk about the analogy between the stability of the table and the stability of God. By social consensus the parties involved could arbitrarily decide to make the table a symbol for God and say that the presence of the table will represent the presence of God, that persons could respond to the table as if responding to God. (This is to be distinguished from idolatry where the realities become fused in one's perception, and the symbolic nature of connection and differentiation is ignored or forgotten.) Suddenly, the table becomes an important meaningful object, and perhaps a significant tool in the counseling process.

If by brainstorming one finds analogies with traditional symbol structures of the Christian community where the persons involved identify with or relate to such a community, then the table may take on sacramental qualities in the mediation of

meaning, belonging, grace, God, gospel. For example, if one connects this particular table by analogy to the table of the Lord's Supper or to the banquet table of the Kingdom of God, then a cornucopia of meaning structures can be tapped, and the counselor's table can hardly be any longer a mere table, an object so trivial as to be ignored. In such a case Williams' principle of linkage is clearly demonstrated as a crucial principle for the counseling process itself, as well as a principle for the analysis of such process. Especially to those who attempt to undertake a pastoral task or a pastoral identity in the counseling and caring enterprises, the principle of linkage and the direct use of analogy offer an opportunity for sacramental mediation.

In the case of the premature infant and his mother in the special care nursery (chapter 3), analogies served to revamp the theological framework of the whole event. When the mother was caught up in despair and talked about dying for her infant son, the chaplain introduced a modeling analogy encouraging her that her example of a will to live could by analogy mediate to her son a will to live.

Most potent of all was the visual analogy between the innocent infant, with his arms restrained to each side and an intravenous needle cap on his head, and the image of Christ on the cross. The immediate experiential dimension of that analogy transformed an image of a victim suffering in loneliness to an image of the community of suffering. Instead of a structure of alienation from a punishing or uncaring God,

analogy opens toward a structure of the God who is in direct community with suffering humanity in Christ on the cross.

This particular analogy is a primal analogy for Christian theology of the atonement. Here the atonement image goes beyond the traditional concepts of a price being paid, a sacrificial appeasement, or a moral example of martyrdom. Through this analogy the community of analogous structures of suffering suggests the image of God entering into the suffering condition of humanity, and through the cross of Christ, building a bridge or a link through which human beings might choose to end their alienation and thus find reconciliation with God.

What this implies is that people do not of necessity suffer alone. God is in communion with them in their suffering. Therefore, an experience of suffering at any level of human consciousness may be an occasion which transcends despair through community with God. In chapter 4, for example, my personal history revealed the way a significant event of suffering--heart surgery and post-surgical infection at age 14--was a turning point in my life which brought me into greater community with God and others, and heightened my experience of a Christian calling. A human event or structure of suffering, however tragic, can be reframed as a doorway toward God by analogy with the cross of Christ.

Williams ties the way of analogy to the significance of God as a suffering God:

The metaphysical doctrine of God's being involves the way of analogy. Its presupposition is that there is a community of participation among the real

things which make up the world. I prefer the concept "community of analogous structures"....A community of beings with analogous structures is the formal mode of participation of God in the creatures and the creatures in God...

We turn then to the doctrine of suffering in God. In this empirical theology I affirm that God does suffer as he participates in the ongoing life of the society of being. His sharing in the world's suffering is the supreme instance of knowing, accepting, and transforming in love the suffering which arises in the world. I am affirming the doctrine of the divine sensitivity. Without it I can make no sense of the being of God. Sensitive participation in this world means suffering, or else our human experience is completely irrelevant to anything we can say about God.²³

Thus the suffering of God is linked by analogy also to the suffering sensitivity of one who acts as pastor or pastoral counselor.

The importance of this particular analogy for pastors is twofold. First, the analogy is virtually universal in scope inasmuch as most pastoral activity focuses on some form of human suffering. Second, this analogy means that the pastor or pastoral counselor has significant theological resources even where therapeutic methods do not produce answers or cures. The goal of pastoral counseling, therefore, may transcend therapy or specific events of healing.

Whether or not healing solutions can be mediated in the pastoral relationship, the pastor still has the capacity to engage in analogical and sacramental mediation. The person who seeks the pastor's help may be enabled to find community with at least one other person as well as with God. That person who suffers is potentially a living symbol of the suffering God. In such an event there may be a sacramental

²³Williams, "Suffering and Being," 191-92.

dimension of human relationships revealing what Williams calls "personal channels of grace."²⁴

In the above case studies, analogies proved to be significant tools in the pastor's attempt to open such channels of grace. Again, for example, in the analogy between Christ on the cross and the suffering infant in his crib, the infant himself is potentially a personal channel of Christ and grace. The love of God can be mediated analogically and sacramentally to others through the one who suffers. Such a dynamic breaks down the traditional division between counselor and client. The one who seeks to minister often finds that he or she encounters grace mediated through the other. Through the community of analogous structures, all persons involved in events of ministry are linked with one another in a greater experience of God, healing, and salvation.

The method of analogy implies that a pastor does not always have to have the answers or the right therapies for those who seek her or his ministry. Often a pastor can only enter into the mystery of a pastoral relationship prepared to explore the linkages among various parts or structures of reality and their connections to ultimate structures--to the whole of life. The search for or brainstorming about analogies provides a helpful practical tool for getting started.

If Williams' principle of linkage works as well as demonstrated in the above case studies, then one may virtually

²⁴Williams, The Minister and the Care of Souls, 52.

always find means for connecting trivia with meaningful ultimates and of connecting human beings with the community of God in a sacrament of salvation.

A pastor's effectiveness in the use of this method may depend on intentional practice, reflective supervision, and artful development of a perceptive sensitivity. Daniel Day Williams offered insight about such sensitivity in his discussion of the human knowledge of God through experience:

The important implication for our interpretation of the Christian experience of God can now be summarily stated. We know God as present to us in all experience. But all our human knowing comes through particular experiences. We always experience in particular ways, here and now. In short our knowledge of anything is historical. It is derived from concrete happenings through which the real order of things is disclosed to us. Every happening can yield knowledge but knowledge depends in part on the subjective element in our encounter with the world. Where there is no sensitivity there is no experience. We ourselves have to be equipped and transformed so that we can respond to what is given to us in our total experience. Our knowledge of God is the case par excellence of this necessity for sensitive discrimination and responsiveness. There are conditions of mind and spirit for recognizing the presence of God, as there are analogous conditions for recognizing the structure, the beauty, and the spirit of a symphony, but the question of what conditions we can specify for sensitivity to God's reality is an exceedingly delicate one. One might rightly ask whether we can specify any conditions whatever. Some indeed appeal to us in these days who say it is only the despair of all human knowing and experience which may open our minds to God.²⁵

In one's will to know and to be open to the vulnerable, suffering dimensions of one's own human experience, a pastor may find a key point of linkage not only to community and

²⁵Daniel Day Williams, God's Grace and Man's Hope (New York: Harper Bros., 1949), 49.

salvation, but to sensitivity and to authority for pastoral identity and activity.

Summary

The problem first addressed by this work focused on the difficulty of doing theological reflection or integration in the analysis of events in pastoral care and counseling. The proposed answer is a simple approach to a practical theology based upon the theology of Daniel Day Williams. The mode he proposed is a method of analogy derived from Williams' theology of the care of souls especially incorporating his "principle of linkage."²⁶ That Williams has provided the foundation for such a method is confirmed in the works of such authorities in the field of practical theology as Seward Hiltner²⁷ and Don Browning.²⁸

After discussing the theological and epistemological foundations for such a method, I have attempted to demonstrate the method of analogy and the "principle of linkage" in three distinct contexts of case study analysis. Each of the case study chapters includes extensive, though not exhaustive theological reflection. The method of analogy employed is simple, yet effective in opening many creative openings and suggestions for theological reflection.

²⁶Williams, The Minister and the Care of Souls, 26.

²⁷Hiltner, "Minister and the Care of Souls, Revisited," 210-16.

²⁸Browning, "Analogy, Symbol, and Pastoral Theology," 117-18.

The method is empirical inasmuch as it begins with the structures and dynamics of the case or event studied, and allows for brainstorming about the ways in which such immediate structures of reality may be revelatory of ultimate or universal structures of reality. Thus this method invites the possibility that contemporary events might reveal new insights about God, humanity, and Creation.

The demonstrations of theological reflection in chapters 3, 4 and 5 provide ample evidence that this method of analogy supported by the principle of linkage provides an approach to practical theology which may have many creative applications both in theological education and in the practice of ministry.

What is perhaps most challenging to some and liberating to others about this method of analogy is that it does not depend on logical deductive reasoning processes. The method does not focus on cause and effect relationships, scientific formulae, or the application of law, doctrine, or dogma.

One chief principle of this method is that simply by virtue of a perceived analogy between two structures or images--particularly between immediate concrete structures and ultimate abstract structures--a theologically significant and informative relationship may be revealed.

One conclusion from this process as employed in the above cases is that a dialectical engagement takes place between experience and theological reflection. The experience of an event in ministry provides rich data for theological reflection. In turn, the theological reflection gives enrichment and meaningful structure to the experience. For

example, an image of a suffering infant provokes by analogy images of a suffering Christ. Christ's suffering and its importance for the human experience of God and salvation provides a concept or image which gives support or meaningful structure to those who agonize over the suffering of an innocent baby.

The whys are still not answered nor are proofs confirmed. Rather by process of analogy, an isolated experience is no longer isolated or totally unique. Rather it becomes connected, an event in context, related to other structures familiar to the human mind. Yet it is still a new event which may bring newness of meaning and significance to the familiar structures. What this theological method provides is linkage, context, a way of knowing and perhaps finding deeper meaning in the particular experiences of human lives.

In his discussion of the principle of linkage as a basis for using the study of psychology in a theological curriculum, Daniel Day Williams also indicates the importance of the place of theology in its relationship to psychology:

Theology by itself never gives sufficient guidance in dealing with human problems, because those problems involve dimensions of experience which have to be understood psychologically. What the psychologist knows about the child's relation to the mother becomes suddenly illuminating for understanding why a particular person cannot accept the mercy of God. By the same token psychology by itself is never enough, for we are led straight back to the question of who man is and what his life is all about.²⁹

²⁹Williams, The Minister and the Care of Souls, 117-18.

A basic proposal and finding of this study is that psychological language, structures, and dynamics can be related to theological structures by process of analogy. The linkage does not necessarily provide any validation of one structure by another, but rather a symbolic relationship which may be enlightening, informative, and perhaps at times sacramental. The study of mother-infant bonding, for example, may provide structures significant for our understanding of human bonding with God--the primitive yet complex nature of both. In the same manner such theological reflection may help to set the dynamics of a particular mother-child relationship in a symbolic context which gives meaning and hope to both.

What this work provides is hardly an answer to the questions of who we are or what life is about, but it demonstrates a simple and practical theological method by which those who identify themselves in the practice of ministry may reflect upon the theological dimensions of their activities, the relationship of such activities to many other structures of human experience, and the implications of such relationships and reflections upon them for future ministry.

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